Reducing Defensive Responding on a Self-Report Measure of Cognitive

Distortions about Adult-Child Sexual Contact: A Revision of the Abel and

Becker Cognitive Scale

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Steven S. Cann
Saint Mary's University

January 1992

Thesis submitted in partial fulfillment of the degree requirements for the Masters of Science degree in Psychology

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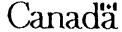


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Running head: Reducing defensive responding

Abstract

Reports of the sexual assault of children have increased dramatically. The lack of tests to identify characteristics of the perpetrators other than the assaultive behavior itself has impeded both the research of child molesters and the identification of molesters who plead innocence. A principal problem in developing appropriate measures is the defensiveness of child molesters; perpetrators do not reveal their true attitudes and feelings about adult-child sex in order to appear socially desirable and to avoid punishment.

This thesis revised the Abel and Becker Cognitive Distortion (ABC) scale (Abel, Gore, Holland, Camp, Becker and Rathner, 1989) in order to reduce defensive responding. The methods employed to reduce response bias were: (a) the addition of "justifications", conditions, or provisos to items which represent cognitive distortions about adult-child sex to make them seem more socially desirable to perpetrators; (b) modifying the social desirability of the items; (c) varying the keying of the items; and, (d) mixing the critical items amongst items from other tests which measure attitudes towards women but which do not describe cognitions about adult-child sex.

The first of two studies comprising the thesis, included the composition of 95 items which "justified" the distorted cognitions about adult-child sex

represented by the items and the administration of those items to 45 community volunteers, who were asked to rate the social desirability of the 95 items using a 9-point Likert scale. The community volunteers rated the justified items as undesirable but not so extremely undesirable as the items comprising the ABC. Items with extremely social desirable ratings were added to the 6 most discriminating and most "transparent" items of the ABC which described extremely undesirable attitudes about adult-child sex, to items which were more moderate in social desirability, both desirable and undesirable, and to, items from the Attitudes Towards Women scale (Kilpatrick and Smith, 1974; Spence and Helmreich, 1973) and the Hostility Towards Women scale (Check, 1985), which were similar in content to the child assault items but which were irrelevant, to form the Revised ABC (RABC).

In the second study, the RABC, the ABC and the Marlowe-Crowne (Crowne and Marlow, 1960) were administered to 54 community volunteers who indicated their agreement or disagreement with the attitudes expressed in the items on a 5-point Likert scale. The six most discriminating items of the ABC were administered as part of both the RABC and the ABC. The community volunteers choose "strongly disagree" significantly fewer times to these same six items less strongly when they were embedded in the RABC than when they were offered as part of the ABC. In response to the RABC items alone, the community

volunteers were significantly less likely to strongly reject the RABC "subtle" or justified, than the "transparent" ABC items.

There were no significant correlations between the Marlowe-Crowne and the ABC or the RABC, although the correlation with the RABC approached significance. It was concluded that the RABC does not elicit defensive responding in community volunteers. Difficulties with two of the RABC items were identified and suggestions for revisions to the RABC offered.

It is predicted that sexual offenders will also respond less defensively to the RABC. It is hypothesized that offenders will accept the justifications at face value and respond to the content of the items truthfully and nondefensively, while non-offenders should "see through" the justifications and reject the items. Reducing Defensive Responding on a Self-Report Measure of Cognitive
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The investigation of sexual offenses against children and the study of offenders who perpetrate them is essential if we are to reduce the number of children who fall victim to these crimes. Unfortunately, the formal exploration of this important area has proceeded slowly for a number of reasons: (a) historically, society has been unwilling to address this assaultive behavior because of the difficulties of investigating it ethically; (b) the research to date has shown limited success in describing and quantifying the factors associated with the commission of these offenses and the characteristics of those who commit them; (c) there has been limited development of theory to explain the prevalence and diversity of sexual offenders and offenses which may serve as a guide to such research; and, (d) the victims of sexual offenses often keep the offenses secret, and the offenders, aware of the disdain shown by both the major culture and the criminal sub-culture, also maintain a cloak of secrecy.

Two recent studies show promise in revealing what appear to be core characteristics of child molesters. These studies have found that individuals who have admitted to adult-child sex will show cognitive distortions or inappropriate thinking in regard to their behavior and that

these distortions serve as a defense mechanism for the sexual assaults. A measure of such distortions, the Abel and Becker Cognitive Distortion (ABC) scale (Abel, Gore, Holland, Camp, Becker, and Rathner, 1989) does discriminate between child molesters and non-offenders. Unfortunately, this test discriminates best when the respondents have been promised anonymity, confidentiality, and immunity from prosecution. Without the promise of these special conditions, the respondents often react to the ABC defensively; child molesters do not report their real beliefs and attitudes about adult-child sex but, instead, they report attitudes which are socially desirable. The present study revised the ABC to reduce defensive responding and to increase its usefulness in identifying child molesters even when no promise of immunity from prosecution has been offered to them.

The revision of the ABC was achieved in two stages. In the first of two studies comprising the thesis, items which described distorted beliefs and attitudes about adult-child sex, but which were "justified" by various conditions or provisos, were written and then rated for social desirability by community volunteers. Such "justifications" did not change the meaning of the items and they do represent cognitive distortions about sex between adults and children. Nonetheless, it was expected that these justified items would not be rated as extremely undesirable as those items offered on the ABC, which do not offer a rationale for the distorted attitudes.

In the second study, new items, which were not as extremely undesirable as the ABC items, were added to the six most discriminating factor 1 items of the ABC and interspersed with similar but non-critical items from other scales to create the 71 item Revised ABC (RABC). The RABC, the ABC and the Marlowe-Crowne (Crowne and Marlowe, 1960), a measure of social desirability, was administered to community volunteers. Considering the difficulty in testing offenders and those accused of sex assault but not yet convicted of assault, and given the limits of a master's thesis, it was decided to work with community volunteers alone.

Before outlining the studies comprising the thesis, the history of abuse against children will be reviewed. The various methodological difficulties inherent in the assessment of sex offenders who wish to keep their identity secret will then be reviewed. Finally, a broadly based cognitive behavioral theory for explaining sexual assault will be presented.

As recent as 15 years ago, the perpetrators of sexual assaults on children were assumed to be insane, moral degenerates. It was imagined that the offenses, being so repugnant, would be committed only by those who could easily be identified because the perpetrators themselves must be obviously repugnant. The results of formal research on sexual offenders and sexual offenses has not supported these early and simplistic views (Baxter, Marshall, Barbaree, Davidson, and Malcom, 1984; Dull and Giacopassi, 1987; Giacopassi and Dull, 1986; Groth and

Birnhaum, 1979; Langevin, Wright, and Handy, 1989; Marshall, Laws, and Barbaree, 1990; Overhosler and Beck, 1986). This research and the chronicle of thousands of sexual assaults have made it clear that sexual offenses are not committed by a few highly disturbed and easily identified individuals but by priests, lawyers, scout masters, counsellors, firemen, loggers, or the next door neighbor, who have little in common except the commission of the sexual offenses (Knight and Prentky, 1990; Langevin, 1989; Stermac, Segal, and Gillis, 1990). The sexual offender is no longer pictured as an unfamiliar monster but is understood to be a seemingly normal father, grandfather, step-father, friend or uncle (Abel and Rouleau, 1990; Langevin, 1983; Langevin, 1989). Indeed, the apparent normalcy of the perpetrators often results in the victims having to prove their charges as credible (Burt, 1980; Russell, 1986; Segal and Stermac, 1990). The reaction of the public to allegations against a "normal" individual has often been one of disbelief or anger because it is imagined that abhorrent offenses must issue from abhorrent perpetrators and that a normal, and thereby innocent person, has been wrongfully accused. Prominent and "respectable" defendants have traded on this belief by impugning the sanity, morals, or motives of the victim, saying the victim consented, or even, claiming that the victims acted in a way to seduce the unsuspecting adult (Barbaree, 1989). Sadly, this strategy of defense by attacking the victims of assault, by its very nature, results in further victimization of these individuals.

History of sexual assault

Historically, children have often been the victims of oppression and violence. They have been offered as sacrifices, abandoned, had their feet bound, sold into slavery or hired out as factory workers; and, children have also been abused sexually. In many poor families, certain forms of child exploitation such as prostitution or the sale of female children, were regarded as a legitimate means of enhancing a family's chance of survival (Bagely and King, 1990). Only in recent times has such treatment been labeled "abuse" and considered a problem. Indeed, our concern for the welfare and exploitation of children can be traced only as far back as the case of Mary Ellen in 1874 (Bagely and King, 1990); this case led to the formation of the Society of Prevention of Cruelty to Children in the early 1900's.

The study of the problem of sexual assault is relatively new, even in Canada. The Report of the Working Group: Sex Offender Treatment Review (Correctional Service of Canada, 1989) concluded that the concerns of the 1900's lead to improved definitions and identification of sexual assault but, little action was taken to reduce the number of assaults until the 1980's. More recently, and since the Review of Sentencing. Conditional Release and Related Aspects of Corrections was published (Correctional service of Canada, 1989), there have been changes in the sexual assault laws, changes in the procedures for

handling victim testimony, an increase in the percentage of individuals convicted of assault who are incarcerated, and the development of assessment and treatment programmes for sexual offenders (CSC, 1989). This recognition of child abuse is matched in the U.S.A., in Sweden, Norway and the Netherlands; however, even now, the understanding that sex with children is abuse is not universal (Bagely and King, 1990).

Why has it taken so long? Historically children and wives were defined as property owned by the head of the household and this legal relationship created a climate which supported abuse (Bagely and King, 1990; Gomes-Schwartz, Horowitz, and Cardarelli, 1990; Russell, 1986). While this definition of children as property is no longer accepted in Western industrialized countries, other attitudes continue to legitimize abusive activity. Attitudes such as the lack of recognition of harm caused to the child, attribution of adult responsibility to the child for their acts, and the assumption that the child can initiate sexual activity and enjoy it, maintain the abuse.

Our inadequate understanding of the harm caused the child is an important factor in sustaining child abuse. Even now, it is sometimes suggested that children can initiate and enjoy sexual behavior (Bagely and King, 1990; Gomes-Schwartz et al., 1990; Russell, 1986). This view is loosely based on Freudian thought and the later research of Kinsey

(Russell, 1986). Freud sexualized children by suggesting that they could have "sexual" feelings and show "sexual" behavior, albeit in infantile not adult form. Told by some of his female clients of sexual assaults by adults, including their fathers, Freud was persuaded by the professional opinion of his day to discount his patients' stories, and to believe that these children had fantasized sexual relations with adults or had, in some way, encouraged the sexual contact with adults; he suggested that such activities or fantasies satisfied their needs (Bagely and King, 1990; Russell, 1986). Russell (1986) stated the following:

The Freudian legacy, then, is to discount the reality of incestuous abuse and, where discounting is impossible, to blame the child for being the one who wanted the sexual contact in the first place (p. 6).

Implicit in the concept that children can and do encourage such sexual contact or that such activities are imagined or fantasized is the myth that such activities are not harmful. Others have accepted that adult-child sex does take place but contended that the harm caused the victims of sexual assault is due to the reaction of society to the child and to the offense, not the sexual behavior itself. Kinsey, Pomeroy, Martin, and Gebbard (1953) did not deny the reality that adults had sex with children but suggested that we ought to minimize its importance and make less of a "fussi" over it in order to reduce the harm caused the children.

Unfortunately, Bender and Blau (1937), in one of the first empirical attempts to document the effects of adult -child sexual contact, concluded that children often initiated sexual activity and enjoyed sexual contact with adults. Their conclusion that young children derive pleasure from sex with adults, that children are responsible for their behavior, and even that children seduce adults, obscured the alternative hypothesis possibility that adult perpetrators may have projected adult sexual characteristics onto children in order to protect themselves.

Bagley and King (1990) indicated that the survivors of sexual assault are similar to soldiers returning from war unscathed or with few apparent wounds. While they may appear unharmed they are not unchanged. The sexual contact they have experienced has had a negative impact and will, most likely, continue to do so for decades afterwards. The most common short term effects associated with the sexual abuse of children are delinquency, acting out behavior, depression, self-mutilation, chemical dependency, and eating disorders. The long term effects are low self-esteem, guilt, depression, alienation, distrust, self-destructive behaviors, and a desperate search for nurturing. Finklehor (1986), summarizing the evidence of existence of negative effects of adult-child sexual contact, stated:

It is true that, because of the general lack of research in this field, clinicians until recently have not been able to substantiate their impressions that sexual abuse is traumatic with evidence from strong scientific studies.

However, as evidence now accumulates, it conveys a clear suggestion that sexual abuse is a serious mental health problem, consistently associated with very disturbing subsequent problems in a significant portion of its victims (p. 163).

Abel et al. (1984) indicated that the harm associated with sexual assault varies, in part, according to the consequences of the assault. For example, an adult can reduce the harm by believing the child, helping the victim regain his or her self-image, allowing the child to express outrage, protecting the child from future assaults, and helping the victim to understand that the adult is completely responsible for the assault. An adult who ignores the child's allegations, who blames the child or who keeps the child at risk will increase the negative impact of sexual assault (Gomes-Schwartz et al., 1990). This summary of research is consistent with anecdotal reports that such assault causes grievous, long-term and pervasive harm.

The reports of the pleasure which some children derive from such sexual activities have also obfuscated the issue of responsibility for the sexual

acts. The implication is that if children are sexual in their behavior and derive pleasure from these behaviors, then they share responsibility for the behaviors with the adults (Russel, 1986). A clear understanding of the responsibility for sexual activity between a child and adult requires a discussion of the child's capacity to provide informed consent for sexual behavior.

Even if a child initiates or agrees to sexual contact with an adult, does this mean that a child is able to consent to the activity? Abel et al. (1984) indicated that there are four issues relevant to a child giving informed consent: (a) the child's understanding of what he or she is consenting to do: (b) the child's awareness of the accepted sexual standards of his or her community; (c) the child's appreciation of the eventual consequences of the decision; and, (d) the difference in power between the child and the adult. It must be clear that children do not understand the nature and implications of these acts, that they do not know the prevailing standards in the community and that they suffer a lack of power. To those who argue that some children do consent, Bagley and King (1990) pointed out that many of the often quoted "signs" of the child-victims complying with or consenting to sexual behavior are, in fact, symptomatic of the victims' attempt to "cope" with the assaults and with the imbalance of power between the child and the assaultive adult. These common symptoms of victims include "... self-blame, post-traumatic reactions and traumatic bonding" (Bagley and King, 1990, p. 127). It is a mistake to

interpret these symptoms (of trauma) as indicating consent. The claim that some children freely consent to sex can finally be laid to rest, if these symptoms are properly understood to be associated with trauma not consent (Abei et al., 1984). Indeed, a child consenting to adult sexual activity is, by its very nature, a contradiction in terms.

Incidence of sexual assault

Recent estimates of sexual assault against children in Canada and the United States have varied. Finkelhor (1979) found that approximately one in four college age females and one in ten college age males in the United States reported having had a sexual experience with an adult when they were children. Eleven per cent of San Francisco women reported at least one experience of sexual abuse before the age of 18 (Russell, 1983). Eleven per cent of female and 3% of male Texas residents reported having been sexually assaulted as children (Kershner and McShane, 1984). Fifteen per cent of female and 6% of male, adult, Boston parents identified experiences they considered to have been childhood sexual abuse (Finkelhor, 1984). Eighteen per cent of females and 8% of male Canadians in a national survey reported "unwanted sexual acts" before the age of 17 (Bagley, 1988). And, forty-five per cent of Los Angeles women reported at least one instance of sexual abuse before the age 18 (Wyatt, 1985). While the wide differences in reported rates may be attributable to differences in the ages and the

socioeconomic backgrounds of the subjects, the regions surveyed, the specific questions asked, and the methodology of the studies, Bagley and King (1990) suggested that it is reasonable to conclude that at least one in four American girls and one in ten boys have been the victims of serious sexual assault. It is also clear that a majority of perpetrators are known to their victims, that the percentage of reported father-daughter incest cases is low compared to the actual number of such cases, and that the presence of a biologically unrelated adult male in the home places children at considerable risk. The problem of sexual assault against children is pervasive, and official statistics, such as criminal charges, underestimate the actual incidence of sexual assault. In the next section, the principal problems in identifying child molesters are reviewed.

Defensiveness among sexual offenders

It was stated above that no single test has been able to identify child molesters. The principal problem is that the crime and the perpetrator are considered repugnant even by other criminals; offenders make every effort to keep their assaults a secret. Keltner and Doyle (1986) pointed out that sexual offenders, in contrast to middle class, out-patients, were much more likely to attempt to fake their responses. Sexual offenders

are aware, unless extraordinary promises of confidentiality are made, that they are being critically evaluated and that these evaluations can have significant and negative impact on their lives, for example, losing their freedom. Unless the offender has an assurance of anonymity, has developed a very trusting relationship with the assessor, or has completely admitted to the offense, he will usually attempt to give the socially desirable, not the truthful response (Murphy, 1990; Stermac et al., 1990). Stermac et al. (1990) confirmed that one of the factors contributing to the underestimation of sexual offenses against children is the tendency of sexual offenders to deny their offenses more adamantly and consistently than other types of offenders and to create circumstances where reporting is unlikely. Based on clinical observation, Barbaree (1989) indicated that the following types of denial and minimization are predominate characteristics of most sexual offenders: (a) the denial of any interaction with the victim; (b) the denial that the interaction was sexual in nature; and, (c) the denial that the sexual interaction was an offense.

The first type of denial involves the pretense that the offender is innocent and that the victim, the police and others are "out to get me". The offender will often concoct elaborate stories, mixing fact with fiction in order to make his statement of innocence more plausible. The second, the denial that the interaction was sexual, is often buttressed by arguments that the offender was angry at the time and that the contact

issued from anger not arousal, or that he was touching the victim for some legitimate reason, for example, changing the child's diapers, applying lotion to the child, etc. Finally, offenders often deny that the sexual interaction was a criminal offense by partially blaming the victims or, even attributing full responsibility for the activity to the victim. In this strategy the victim is depicted as someone who either consented to the act, did not resist, or, even initiated the activity (Barbaree, 1989).

Minimization is a subtle form of denial wherein the offender denies full responsibility for the activity, questions the seriousness of the offense and the degree of long term harm suffered by the victim. "Minimizers" underestimate the number of offenses against any one victim and the number of victims. A variant of minimization takes place when offenders claim that they are afflicted with a "problem" which is not their fault, such as emotional problems, hormonal problems, a bad childhood, past victimization, a cohol or drug use, stressful personal circumstances, or social pressure (Barbaree, 1989). Some minimize their assaults by claiming that the victim had had many partners before the assault and that one more partner couldn't possibly harm the victim. Others will argue that the victim learned something beneficial from the experience.

Langevin (1989) indicates that defensiveness in sexual offenders is a serious difficulty which should be a major consideration in all psychological assessments of them. He found that "Fewer than one-third

of the cases admitted to their offense and their sexually anomalous preference" (p. 284) and that fourteen per cent of subjects attempted to actively manipulate or fake results in phallometric testing. Attempts at faking were most frequently made by those who admitted to the offense but claimed special circumstances (20.0%) or who denied everything (23.1%). Langevin (1989) recommended that clinicians should always assess defensiveness according to the following criteria: (a) clear evidence of sexually anomalous behavior which the patient denies; (b) marked contradictions in self-reporting; (c) deviant arousal shown during phallometric testing which is supported by corroborative data and which is inconsistent with patient's presentations; and, (d) any claim of sudden cure or change.

The impact of offenders' defensiveness on the reporting of sexual offenses was demonstrated in a remarkable study by Abel and Rouleau (1990). They took extensive steps to ensure the confidentiality of the admissions of offenders and obtained frightening descriptions of sexual offenses and numbers of victims. Recruiting 561 participants from a variety of social agencies, the researchers reported that 49% had targeted victims in one age group only, 31.3% assaulted victims in two age groups and 11.2% were involved with all three age groups (child, adolescent, and adult). Sixty seven point two per cent of the subjects targeted only females, 11.9% targeted males and 20% targeted both genders. The average age of offenders was 31.5 years old, 40% had

one year of college, and the group, as a whole, represented all socioeconomic levels. Fifty-six point three per cent reported the onset of at least deviant sexual interest prior to age 18. Each offender reported at least two different paraphilias and an average of 380.2 sex offenses by adulthood. The results of this study are consistent with the concerns that there is a wide and unacceptable gap between the number of sexual assaults being committed and the number being successfully prosecuted. It also demonstrates that those suspected of assault do not admit their acts.

The present study revised the ABC to develop a measure which reveals an important characteristic of child molesters, cognitive distortions about adult-child sex, as an aid to identifying child molesters. Before discussing the revision of the ABC, various theories of child sexual abuse will be reviewed.

Why men assault children

Single factor models, multiple factor models, and comprehensive theories have been offered to explain the sexual assault of children. While it is beyond the scope of this thesis to review all of them, samples of each class or type are provided below. A multiple factor model is proposed as useful in understanding this kind of assault. Finally, a multiple factor model is integrated with a comprehensive theory to

provide a broadly based cognitive behavioral explanation of sexual assault.

Single factor models of sexual assault

Many researchers continue to look for a single factor or cause of sexual assault against children and a review of the literature reveals many different, single factor theories have been proposed. The most common single cause theories suggested in the literature include the following:

(a) deviant sexual preference; (b) substance abuse; (c) a history of violence and sexual abuse in the past of the perpetrator; (d) mental illness of the perpetrator; (e) the perpetrator's physical health; (f) neuropsychological problems suffered by the perpetrator; (g) social incompetence of the perpetrator; (h) dysfunction in the perpetrator's marriage; (i) dysfunctional family dynamics; (j) situational factors, such as, the death of a man's wife; and, (k) the male domination of our culture. None of these single causation theories, on its own, seems to provide a definitive answer and, certainly none apply to every perpetrator (Marshall and Barbaree, 1989; CSC, 1989; Herman, 1990; Marshall and Barbaree, 1990).

Multiple factor models of sexual assault

It would seem to be more fruitful to develop multiple-factor models rather than try to find one "primary" factor which is adequate to explain the diversity of the individuals involved and the diversity of the behaviors involved in sexual assault. Overholser and Beck (1986) proposed that no single factor can identify individuals who have committed sexual offenses. They assessed child molesters, rapists and three control groups in several role-playing scenes in which heterosexual social skills, social anxiety and assertiveness were examined. The 60 subjects also completed a battery of self report measures intended to assess hostility, impulsivity, and attitudes towards sex, violence and rape. None of their measures of hostility and impulsivity, taken individually, were useful in differentiating the groups. Malamuth (1986) also concluded that a complete understanding of sexual offenses requires a multiple-factor model, with the individual factors conceptualized as interactive, rather than additive.

A comprehensive model for explaining sexual assault

The social learning model proposed by Bandura (1986) offers a model with sufficient breadth and complexity to accommodate multiple causal and interactive factors of sexual assault. In the following section, those

components of the social learning model associated with the social and self-regulation of sexual behavior will be presented.

Behaviour, which individuals view as being in their own self interest, often comes into conflict with social demands and limits and must be restrained. There are two broad sources of restraint of such behavior:

(a) social restraint, which is rooted in the <u>anticipation</u> of external punishment or negative consequences; and, (b) internal restraint which operates through the <u>anticipation</u> of self-censure of one's own conduct. Bandura (1986) stated:

Anticipated self-censure for violating one's own standards and anticipated social censure for violating societal codes serve as the principal restraining mechanisms. It is not that thoughts of misdeeds activate anxiety that has been conditioned to them but that thoughts of the adverse personal and social consequences of misdeeds leads persons to restrain transgressive actions (p. 298).

Of the two, internal restraint of behavior is preferable and more effective in controlling behavior but, unfortunately, those individuals who lack internal restraint can only be deterred by social restraints, such as legal sanctions or punishment. Bandura (1986) indicates that the threat of external punishment can act as a deterrent in two ways: (a) direct

deterrence (i.e. transgressors are punished); or, (b) vicarious (general) deterrence (i.e. transgressors are punished to discourage others from committing similar acts). Society, unable to reveal, prosecute and punish every transgression, depends on the effectiveness of vicarious deterrence. Unfortunately, some individuals are not restrained by general deterrence because they often see or hear of others engaging in transgressive actions, gaining pleasure from them and not being punished. Those individuals who lack internal restraints and who are dependent on external mechanisms for restraint quickly deviate if they observe others violating the rules without negative consequences.

The probability of individuals engaging in personally rewarding but socially prohibited behavior increases if it is difficult for the individuals to achieve what they want by legitimate means. Bandura (1986) stated:

By disregarding prohibitions, people can get what they want more expeditiously than by following irksome rules. Those who lack pro-social alternatives can secure, by transgressive means, rewards that would otherwise be denied them (p. 290).

Even the inhibiting effects of internal restraint processes can be disengaged when people come upon an opportunity to engage in personally rewarding but socially prohibited behavior. There are several

processes which individuals use to disengage their internal controls and to avoid self-condemnation: (a) "moral justification" whereby the reprehensible conduct is made personally and socially acceptable by portraying it in the service of moral ends, for example, training soldiers to kill in order to preserve world peace; (b) "euphemistic labeling" whereby the pernicious conduct is made benign, for example, murder is renamed as "offing him"; (c) "advantageous comparison" whereby self-deplored acts are contrasted with flagrant inhumanities, for example, war atrocities are justified as being in response to the even more offensive acts by the enemy; (d) "displacement of responsibility" whereby the responsibility for reprehensible acts is assigned to an authority figure, for example, Nazi prison guards obeying the orders of their superiors; (e) "diffusion of responsibility" whereby responsibility is reduced by having no clear decision maker, for example, decision by committee or multiple committees; (f) "distortion of consequences" whereby the consequences of action are actively disregarded or misrepresented, for example, the alcohol industry discrediting evidence of increased health risks; (g) "dehumanization" whereby characteristics are attributed to the victims so they are no longer viewed as persons, for example, calling Russians "Commies"; and, (h) "attribution of blame" whereby blame is attributed to those who are being mistreated, for example, claiming that a woman invited rape by dressing provocatively (Bandura, 1986; Murphy and Stalgartis, 1987).

The disinhibition of internal restraint does not normally occur suddenly but is usually gradual; as an individual engages in unacceptable behavior, his feelings of discomfort and self-censure often diminish with repeated performance of the behavior. The quality and character of the unacceptable behaviour may change and acts, originally regarded as abhorrent, may finally be performed without much distress (Bandura, 1986).

It is also important to acknowledge that these internal restraint processes interact with the parallel processes of internal and external consequences of the unacceptable behavior (Bandura, 1986). External consequences have the greatest impact on behaviour when they are not in opposition to the internal consequences. For example, if an individual is internally restrained from adult-child sexual contact, external social prohibitions, even if experienced vicariously, will effectively inhibit the behavior. Bandura (1986) indicated:

Under these conditions, rewardable acts are a source of self satisfaction and punishable ones are self-censured. In studies pitting values against outcomes, the same external rewards can enhance, diminish or have no effect on behaviour, depending on whether it is personally valued, devalued or viewed neutrally (p. 375).

Once behavior which is personally rewarding even though socially prohibited is established and is frequent, the inhibition of this behavior by external sanctions, is difficult. As Bandura (1986) states:

... inhibitions are more difficult to establish and sustain by either direct or vicarious sanctions when they require relinquishing behaviors that are personally functional (p. 290).

Integrated theory of sexual assault

Marshall and Barbaree (1990) integrated various single factor theories of sexual assault, the biology of sexual behavior, social-learning theory, and a cognitive model to form an integrated theory of sexual assault. They theorized that sexual behavior is learned, even though biological factors control the initiation of sexual patterns of behavior. The basic premise is that in males sex is rewarding, as a result of specific biological patterns and and that the biology of sexual activity overlaps with the biological patterns associated with aggression. Marshall and Barbaree (1990) indicated that males may find it difficult to disentangle sex from aggression because both use many of the same neurological networks and more importantly, the same hormones for expression. As a consequence males have to learn to inhibit the expression of this behavior to avoid assault:

... the task for human males is to acquire inhibitory controls over a biologically endowed propensity for self-interest associated with a tendency to fuse sex and aggression. ... and ... environmental conditioning and learning exert powerful controlling influences on behavior (Marshall and Barbaree, 1990, p. 257).

The factors which interact to affect the individual's ability to learn these inhibitory controls fall into two broad categories: (a) biological factors which include physical health, hormonal levels, and neuropsychological status; and, (b) environmental factors which include childhood experiences, psychosexual history, social cultural context, transitory situational factors and current family environment. These two categories of factors are not functionally independent of each other. Indeed, factors from one category often affect factors in the the other. As Marshall and Barbaree (1990) conclude:

Thus, nature and nurture are understood to interact in determining behavior. The very factors which interfere with, or make difficult, the development of inhibitory controls, are those which may, under certain conditions, further facilitate the fusion of sex and aggression (p. 258).

The biological and environmental consequences of sexual and aggressive acts during puberty determines whether the two functions of sex and aggression are either fused or disentangled. This theoretical focus on the interaction of biological, initiating factors and environmental controlling, or disinhibitory factors, minimizes the importance of "pure" biological factors such as the level of the sex hormones. According to Langevin et al. (1984), while abnormally high levels of hormones may have interfered with the acquisition of controls in a small minority of sexual offenders, most offenders do not show abnormally high levels of hormones but have simply not acquired sufficiently strong inhibitory controls over sex and aggression. Furthermore, the biological propensity for all mammals to engage in sexual activity to propagate the species should not be confused with a biological propensity to sexual assault. The question is not why individuals (biologically) "need" to engage in sexual behavior, but why males sexually assault in the face of negative social reaction.

It appears that environmental factors play a critical role in shaping the expression of sexual needs, either by separating sex and aggression or fusing them. Three major environmental factors which seem to influence the expression of sexuality are as follows: (a) childhood experience; (b) sociocultural context; and, (c) transitory situational factors.

Childhood experience

The childhood experiences of males who commit sexual assault in adulthood often include frequent and severe punishment which is not functionally related to their behavior (Rada, 1978). Similar data exists for child molesters (Finkelhor, 1979; Finkelhor, 1984; Hanson and Slater, 1988). Apparently, as children, these men modeled the aggressive behavior of their parents and learned to use aggression to solve problems. The consequences of such modelling is that these man, as adults, are unable to

... develop intimacy and to feel empathy, and it leaves them socially inept, lacking in confidence, self-centered, hostile, aggressive and negatively disposed towards women (Marshall and Barbara, 1990, p. 263).

Sociocultural controls

Western media bombard us with inappropriate messages about sex between men and women, such as the acceptability of male domination and negative attitudes towards women (Marshall and Barbaree 1990). For example, traditional sexual roles suggest that (Western) men should pursue sexual activity with a women even when she indicates no interest (Check and Malamuth, 1983). A number of researchers have postulated

that there are many Western societal attitudes which directly increase the likelihood of males committing rape, particularly "Date" or Acquaintance Rape (Burt, 1980; Giacopassi and Dull, 1985; Stermac, Segal, and Gillis, 1990; Tieger, 1981).

Transitory situational factors

There are also transitory situational factors which may reduce inhibitions against sexual assault. If an individual, who has been conditioned to respond in an aggressive manner but who has also learned to inhibit his behavior to avoid social sanctions, believes that the sanctions for such behavior will not be forthcoming, then that person will tend to act in an aggressive fashion (Bandura, 1986). Barbaree (1990) reported that the disinhibition of arousal to rape, in laboratory situations, was associated with the following situational factors: (a) alcohol intoxication; (b) exposure to aggressive pornography; (c) transitory mood states; and, (d) victim blame.

Alcohol intoxication

The disinhibition of the prohibitions against sexual assault by alcohol is of two distinctly different types. One seems to be the direct effect of the chemical properties of alcohol, that is, its "relaxant" qualities. The other is

the individual's understanding that drinking legitimizes "acting-out". For example, an individual who believes that he is not responsible or cannot control his actions while drinking is far more likely to act recklessly when drinking than an individual who believes that he can be and is responsible, even if he consumes alcohol (Briddell and Wilson, 1976; George and Marlatt, 1986; Lang, Goeckner, Adesso, and Marlatt, 1975). Males, who were led to believe they had drunk alcoholic beverages, behaved more aggressively and displayed greater arousal to erotic films, to depictions of rape and sadistic aggression toward women than those who thought they had drunk non-alcoholic beverages, regardless of whether their drinks contained alcohol or not. It is not alcohol alone which disinhibits the individual but also the cognitions which are associated with the consumption of alcohol.

Violent pornography

Violent erotica can disinhibit individuals, especially when it incorporates certain elements that weaken the operation of internal controls (Bandura, 1986; Donnerstein, 1980; Donnerstein and Linz, 1986; George, Phillips, and Skinner, 1988; Malamuth and Check, 1981). Some of these disinhibiting themes of violent pornography are: (a) the de-humanization of women; (b) attribution of blame to the victim; (c) the belief in uncontrolable biological instincts; and, (d) the belief that minimal or no harm is caused. And, masturbation to violent erotica makes the

depictions of violent sex more sexually arousing by associating it with sexual pleasure and orgasm (Laws and Marshall, 1990).

Transitory mood states

Transitory mood states, like anger, can change the sexual arousal of stimuli (Malamuth, Check and Brieire, 1986; Malamuth, Heim and Feshbach, 1980b; Yates, Barbaree and Marshall, 1984). Yates, Barbaree and Marshall (1984) tested normal males and found them to be inhibited while watching a video of forced sex but, these same men showed arousal to forced sexual contact after being made angry by a woman who insulted them. Certainly, anger is not the only transitory mood which can affect sexual arousal. Sexual arousal itself can alter the arousal qualities of stimuli (Barbaree and Marshall, 1988). Marshall and Barbaree (1990) suggested that prior sexual arousal enhances responses to all subsequent sexual stimuli.

Victim blame

The likelihood of sexual assault is increased if the would-be perpetrator employs the following cognitive operations: (a) pretending that the blame for the assault should be shared, minimized, or ignored, for example, the offender might say to himself, "She asked me up to her apartment, she knew what that meant"; (b) dehumanizing the victim, for

example, the offender might say, "She was a prostitute so how could it be rape?; (c) displacement or diffusion of responsibility, for example the perpetrator might say, "It is my wife's fault for not being sexually forthcoming"; and, (d) portraying the behavior as being in the service of moral ends and contrasting it with even more reprehensible behavior, for example, offenders sometimes say, "Me having sex with my daughter is better than her boyfriends having sex with her because I really love her and they don't".

Within the broad theoretical approach proposed by Marshall and Barbaree (1990), one defensive mechanism, the use of cognitive distortions in regard to adult-child sexual activity, which disinhibit males and which provide a rationale for personally rewarding but socially prohibited behavior, will be examined.

Cognitive distortions

Abel, Gore, Holland, Becker, and Rathner (1989) define a "cognitive distortion" as,

... an individual's internal processes, including the justifications, perceptions and judgments used by the sex offender to rationalize his behavior (p. 137).

Cognitive distortions allow the offenders to view their deviant acts as acceptable, or, at least, justifiable. The distortions allow the offender to deny or minimize the harm done to the victim, and allow him to participate in the behavior without,

... the anxiety, guilt, and loss of self-esteem that would usually result from an individual committing behaviors contrary to the norms of society (Abel et al., 1989, p. 137).

These distortions reduce offenders' inhibitions and allow them to participate in activities they know to be unacceptable by society's standards. Despite the frequent clinical observation of these cognitive distortions in sexual offenders, Marshall, Laws and Barbree (1990) suggest that there is little empirical knowledge about how

... deviant sexual cognitions are initiated, maintained, developed into fixed cognitive structures or how they are used to form 'imaginary scenarios' for sexual offenses (p. 5).

Cognitive Distortions in the General Population

The work of Brownmiller (1975), Clark and Lewis (1977), Burt (1980), and Field (1978) laid the early groundwork for identifying the contribution

of cognitive distortions about rape in our culture. Burt (1980) examined the existence of "rape myths", and found that approximately 50% of the respondents agreed with statements such as, "A woman who goes in the home or apartment of a man on the first date implies she is willing to have sex". Burt (1980) reported that:

First, many Americans do indeed believe many rape myths. Second, their rape attitudes are strongly connected to other deeply held and pervasive attitudes such as sex role stereotyping, distrust of the opposite sex (adversarial sexual beliefs) and acceptance of interpersonal violence (p. 229).

Surveying the incidence of these distortions in a college population, Giacopassi and Dull (1986) asked 449 individuals attending an urban southern university to complete a questionnaire which offered statements describing negative attitudes towards women, hostility towards women, and beliefs in "rape myths" which are defined as "prejudicial, stereotyped, or false beliefs about rape, rape victims and rapists." They found that a substantial number of college volunteers, between 17 and 75%, believed in the "rape myths". These respondents strongly or moderately agreed with statements that reflect prejudicial, stereotypical or false thinking concerning rape, such as "When a woman says 'no' it sometimes means 'yes'". Predictably, belief in these myths was much more prevalent in men than women.

Dull and Giacopassi (1986) also examined the sexual and dating attitudes of the same sample, and how these attitudes related to date rape. They found that over two-thirds of the male respondents agreed with the statements that "When it comes to sex, females say 'no' but mean 'yes'" and "For some females, physical aggressiveness by the male is a necessary prelude to the acceptance of love and affection". Approximately half the respondents agreed with the statements that "Females who ask males out on dates are probably looking for sex" and "In the dating game, males are the predator and females the prey". The researchers suggested that these results indicated that wrongful myths and cognitive distortions about sex and women are common even in the "enlightened" climate of a university community.

Dull and Giacopassi (1986) noted that approximately 20% of all college women are victims of rape or attempted rape and that 73% of these rapes were carried out by an acquaintance on "dates". These rapes were carried out by apparently normal men operating within a normal social context. The authors felt that within our society there exists hidden norms that condone this type of sexual violence as a normal part of courtship.

Tieger (1981) found that males view rape as a less serious crime than females and often view victims as failing to properly resist the crime. He also found that 35 out of 172 male subjects indicated, in response to a

transparent item, they might rape if they were sure they would not be caught (an item is considered transparent if the behavior is clearly described and the socially acceptable response is clearly discernable). Why did these subjects indicate that they would engage in behavior which, presumably, is considered highly undesirable in our society? The subjects who indicated they might rape were able to justify their attitudes by adopting "a coherent pattern of disinhibitory beliefs concerning the normality and desirability of aggression against women". These pro-rape responses and the disinhibitory beliefs which support them suggest the existence of cognitive structures which are concordant with the disinhibition of aggressive sexual behavior towards women.

Segal and Stermac (1990) hypothesize that cognitive processes operate at different levels: (a) cognitive structures which are defined as "... the organization of memory content and various linkages and associations among stored features of memory"; (b) cognitive propositions which are defined as "... the type of information which is actually stored or represented in various cognitive structures"; (c) cognitive operations which are defined as "... the various processes by which the components of the information-processing system operate"; and, (d) cognitive products which are defined as "... the actual thoughts or images which come to mind that result from the input of information and the interaction of cognitive structures, propositions and operations" (p. 162).

To date, little research has been completed which supports the hierarchy described in the model, most research focusing on only one level, that is, cognitive products in rapists. Segal and Stermac (1990) indicate that since the study of the other "higher" aspects of the model will be difficult, they should proceed only when the link between cognitive products and sexual assault is clearly established.

Below, a review of the ABC scale (Abel et al., 1989) is offered. This measure of cognitive distortions or using Segal and Stermac's (1990) terminology, cognitive products, may reveal the link between such cognitions and sexual assault. Once this link has been established, research may investigate the development of these distortions, the cognitive structures which support and maintain them, and the benefit of changing them.

Before describing the ABC in detail, the treatment of sexual offenders will be reviewed briefly. This review indicates that change in the cognitive distortions shown by sex offenders is associated with a reduction in assaults.

Treatment

In a survey of treatment programs in the U.S.A. and Canada, Borzecki and Warnwith (1988) found a wide variety of treatment models in the

U.S.A., but a largely behavioral approach in Canada. Barbaree (1990) indicates that this narrow Canadian focus is largely explained by the limited empirical data which is relevant to treatment versus the availability of a technology to measure arousal (phallometrics). The technology of the measurement of sexual arousal focused treatment in Canada on the behavioral modification of deviant sexual arousal. In short, researchers were "searching where the light was" and the light was where there was a measure. Research has demonstrated however, that emphasis on behavioral treatment of deviant arousal is mistaken: While the most dangerous rapists generally show deviant arousal, only 28% of incest and 49% of non-familial child molesters who assault girls and 61% of those who assault boys show deviant arousal (Marshall, 1990). And, the results of recent evaluative studies of programmes using modification of deviant arousal have not been encouraging (Marshall, 1988; Marshall and Barbaree, 1990). While there has been some success in changing or reducing deviant arousal in the laboratory setting, this technique does not appear to be effective in reducing recidivism.

However, in the last several years, based on the clinical observations of a link between distortions and offenses, there has been an increasing emphasis on the identification and modification of cognitive distortions in sex offenders in treatment programmes (Barbaree, 1989; Herman, 1990; Marshall, 1990; Marshall and Barbaree, 1989; Nelson, Miner, Marques, Russell and Achterkirchen, 1988; and Pithers, 1990). Recent reviews of

offenders indicates that cognitive behavioral approaches appear to be the most effective in dealing with this difficult client group, particularly child molesters (Marshall and Barbaree, 1990). Andrews et al. (1990) completed a meta-analysis of treatment outcome studies and found a positive effect for the cognitive-behavioral component of treatment when it was separated from other treatment components. These conclusions are consistent with the Report of the Working Group: Sex Offender Treatment Review: The Management and Treatment of Sex Offenders (CSC, 1989) which states

The three cognitive-behavioral programmes [reviewed by the working group] that used comparison groups all s'nowed significant treatment effects. Averaged across the three studies, the sexual recidivism rate for the treated offenders was ten point two per cent while the rate for the comparison group averaged twenty five per cent (p. 21).

Marshall and Barbaree (1989) caution that although the results appear to support the modification of cognitive distortions as treatment, such treatment is not equally effective for all offenders: The results with rapists are not as encouraging as with child molesters. Additional interest in the cognitive-behavioral focus has been provided by data indicating that some modalities of treatment, such as client centered therapy, may

actually result in higher rates of recidivism (Andrews et al., 1990; Furby et al., 1989).

The research to date has led to a dramatic increase in the interest in the cognitive-behavioral aspects of sexual offending and the methodologies employed in identifying and changing cognitive distortions.

Unfortunately, the lack of an effective instrument to measure cognitive distortions even in defensive offenders has hampered the exploration of these areas. This study offers a revised version of the ABC which may provide the desired test.

Cognitive distortions in offender populations

Rapists

Attempts to use transparent attitude and rape myth questionnaires have met with mixed success when used with an offender population. Sattem, Savells and Murray (1984) using the Attitudes Towards Women Scale (Spence and Helmuch, 1973) and the Macho Scale (Villemiz and Touhey, 1977), found no significant differences between child and adult oriented offenders and non-offenders on either measure. Segal and Stermac (1990) summarized the research on cognitive products with rapists:

Rapists do not seem to differ from other low socioeconomic controls, whether in or out of prison, on such measures [of cognitive products] as attitudes concerning women's role in society, fear of negative evaluations, social situations, ... during a conversation with a female confederate (p. 170).

There are several explanations for this failure to link negative and hostile attitudes to sexual assault. One explanation, previously mentioned, is the tendency of sexual offenders to deny or minimize their involvement in sexual offenses. The offenders, knowing society's view, make the socially desirable response on questionnaires, rather than truthfully respond to the content of the items.

Another reason for the failure to find a relationship between the attitudes of offenders and sexual assault is a lack of specificity in the attitudes being measured. Stermac et al. (1990) state that:

... one reason why there is such a poor correlation between attitude and behavior relationships is that the attitude being measured is often global (e.g., attitudes towards women), whereas the behavior to be predicted is usually quite specific (e.g., a proclivity for sexual assault) (p. 152).

The study of attitudes in child molesters has suffered from the same lack of specificity. Measures have generally been of social competency and have not shown child molesters to be significantly different than various control groups (Segal and Stermac, 1990).

Segal and Stermac (1989) attempted to empirically demonstrate the existence of assault-specific cognitive distortions in child molesters which have previously been reported in clinical and anecdotal accounts. The researchers wrote vignettes which reflect specific distortions associated with child molesters, as opposed to rapists, voyeurs etc., and varied the following dimensions:

... responsibility for the act, the child's complicity in its performance, the extent to which the child may have benefitted or learned something from taking part in such contact, and the degree to which performance of this behavior should be punished (Segal and Stermac, 1990, p. 169)

The child molesters' responses, all of whom had admitted their offenses, were compared to socially and economically appropriate institutional and community controls responses. The child molesters perceived

significantly more benefit for children, greater child complicity, less responsibility on the part of the adult and less need for punishment of the adult than did controls. Segal and Stermac (1990) also noted that:

Subjects' reactions were moderated in part by the child's response to the contact depicted, such that when the child's response was clearly negative (eg., the child cries), all groups displayed a concordant pattern of responding. In those situations where the child's response was essentially ambiguous (eg., just staring at the adult), the child molesters' responding diverged the greatest from other respondent groups (p. 169).

It was postulated that, in the ambiguous, victim response situations, the child molester was less able to use the victim's reaction to determine his own responses and, thus, his true opinions surfaced.

Based on their previous clinical observations, Abel, Gore, Holland, Camp, Becker, and Rathner (1989) designed a questionnaire which required the subject to respond to statements which reflected attitudes specific to sex with children. The Abel and Becker cognitive distortion scale (ABC) was comprised of 29 items, which was administered to a group of 240 child molesters. Respondents indicated their agreement

with the items on a 5-point Likert scale. The final items were written to reflect the following categories of distortions:

- (1) Children are not harmed by having sex with an adult.

 If a child has sex with an adult, the child will look
 back on the experience as an adult and see it positively;
- (2) Children actually benefit from such interactions; for example, when a child watches an adult masturbate it helps the child learn about sex;
- (3) Children are able to consent to sex; that is, a child will never have sex with an adult unless the child really wants to have sex;
- (4) Many children desire sex with an adult; that is, children don't tell others about having sex with a parent because they really like it and want it to continue; and,
- (5) Sex with a child can be justified; for example, a man or woman is justified in having sex with his or her children or step-children, if his wife or husband doesn't like sex (p. 144-145).

Understanding the pervasiveness of denial and minimization among sex offenders, Abel et al. (1989) took extraordinary precautions to ensure confidentiality of the subjects' identities by assigning identification numbers to the respondents names, by holding the names and codes

outside the U.S.A., by excluding questions which could lead to an identification of particular offenses and people, and by obtaining a certificate of confidentiality (Federal Register, 1975) which ensured that no official body could force the researchers to reveal the identities of the participants. The experimental group volunteers were recruited through the media, and from discussions with mental health and criminal justice officials in Memphis, Tennessee, and New York. These precautions appeared to reduced the respondents' need to respond in a socially desirable manner and allowed the participants to respond to the items frankly.

Better than by chance, the questionnaire discriminated 48 child molesters from a control group of 86 medical workers and university students. Responses to the questionnaires were factor analyzed and the following significant factors emerged: (1) adult-child sex helps the child; (2) children initiate adult-child sex; (3) adults initiate adult-child sex for specific reasons; (4) children's behavior shows their desire for adult-child sex; (5) adults can predict when adult-child sex will damage the child in the future; and, 6) adult-child sex is or will be acceptable in society. The first factor, comprised of six items, accounted for 35.4% of the variance and no other factor accounted for more than 5% of the variance. All the factors together accounted for 49.6% of the variance. A scale based on the first factor alone was able to significantly differentiate child molesters from non-offenders (Abel et al., 1989).

Abel et al. (1989) indicated that the ABC should be modified to make it more useful in the assessment of child molesters who are not offered confidentiality. The authors suggested that the keying of the items be varied, and that the items be less transparent to offenders but still clearly transparent to non-offenders. The modification of the items to provide a justification for the attitude or behavior or provide an ambiguous response by the victim, should not make it any less clear that the behavior is unacceptable to non-offenders. The items would remain transparent and unacceptable to non-offenders, while being opaque and acceptable to offenders. It was planned that the that the items would be embedded in a questionnaire which included items which examined more general sexual beliefs and attitudes, in order to disguise the purpose of the test.

Defensive responding to self-report measures by sexual offenders

As has been already noted, sexual offenders can be expected to misrepresent their responses on self-report measures in order to avoid punishment, to avoid the self-censure, or to avoid the disapproval of the individual who is assessing them. They may also routinely agree or disagree with items which they do not understand. Since confidentiality is not possible when assessing sex offenders in a correctional setting, steps have to be taken to either minimize the effects of defensive or

social desirability responding and other response sets on the self-report measures or, at the very least, to identify and measure those effects. A short discussion of response bias follows.

Response sets

Response sets is the tendency of the respondent to endorse items or not, depending on a characteristic of the item other than content (Anastasi, 1988). The problem of response sets is extremely important when asking subjects to reveal their opinions on subject matter about which society holds strong views. If offenders have knowledge of what is socially desirable and respond to items in terms of social desirability, rather than what they really think and feel, then child molesters may not respond differently than normals (Buss and Durkee, 1957; Gendreau, Irvine and Knight, 1973). Gendreau et al (1973) examined the ability of prison inmates to "fake" good and "fake" bad on the MMPI. They reported that inmates had no difficulty in "faking" either "good" or "bad" on demand. This was even true of inmates who had only moderate reading ability and a low average IQ.

The pay off for responding to questionnaires in a social desirable varies.

Edwards (1957) conceptualized social desirability as a respondents' tendency to "put up a good front" which may be a reflection of the respondent's lack of insight into his or her own behavior or, an

unwillingness to face up to his or her own limitations. Crowne and Marlowe (1964) suggested that social desirability responding was related, not only to the respondent's tendency to present a positive image, but also to the respondents more general need for self-protection, avoidance of criticism, and social approval.

There have been two major methodologies for measuring the tendency of any questionnaire to elicit social desirability responding. The first involves measuring the relationship between the social desirability ratings of the items comprising a scale and the endorsement values of these items (Edwards, 1957); the second relates the respondent's tendency to present themselves in a socially desirable manner, as measured by an independent test, and their scores on the test in question (Crowne and Marlowe, 1964).

Test developers have attempted to reduce social desirability responding by requiring subjects to respond to ambiguous items like those in projective tests, to "... choose between two descriptive terms or phrases that appear equally acceptable but differ ... [or content]" (Anastasi, 1988, p. 551), or to respond to apparently innocuous items chosen through criterion keying. Criterion keying involves the administration of a large number of apparently unrelated items to groups diagnosed a priori as, for example, depressed, or schizophrenic, and a group considered normal.

The items which differentiate the groups comprise the scale labeled as "depression" or "schizophrenia".

Measuring social desirability responding to a test by correlating the social desirability of the items with the endorsement of the items, has been criticized. The high correlation between the MMPI and the measure of social desirability responding designed by Edwards (1957) probably came about because the two scales had items with similar content, not because subjects responded to the social desirability of the MMPI items (McCrae, 1986; Kozma and Stones, 1987). Indeed, Crowne and Marlowe (1960) suggested that people who truthfully presented themselves as socially desirable may also have been those who did not show pathology.

Unlike the Edwards measure, the Marlowe-Crowne (Crowne and Marlow, 1960) social desirability scale was designed to avoid confounding the measure of social desirability with measures of pathology. The items were not taken from the MMPI items but clearly described behavior which reflected social values. The final scale of the Marlowe-Crowne includes 17 items representing positive behaviors, which most people are not likely to exhibit, and 16 items representing negative but non-pathological behaviors which are likely to be true of the general population (Ballard et al. 1988). McCrea (1986) indicates that these two scales represent discriminable dimensions of the tendency of

people to present themselves as socially desirable. Millham (1974) in reviewing the research on the Marlowe-Crowne social desirability questionnaire indicates that the Marlowe-Crowne is,

... comprised of two significantly related but <u>somewhat</u> unique response tendencies. The first consists of the tendency to attribute socially desirable but improbable characteristics to oneself (attribution component); the second consists of the tendency to deny undesirable but highly probable characteristics (denial component). By summing across these two kinds of responses it has been assumed previously that both responses are equivalent with respect to approval-motivated responding [Emphasis is mine] (p. 380).

Millham (1974) examined these two components of social desirability responding in a series of experiments in which individuals were given the opportunity to cheat on a previous task after receiving feedback that they had done well or failed a task. Those individuals who had previously failed at the task and scored high on social desirability tended to cheat to improve their scores, while those who had done well did not cheat, regardless of their social desirability scores. Those who scored low in social desirability and failed did not cheat to improve their scores. He also found that those who cheated following failure generally had

higher scores on the denial component of the Marlowe-Crowne and not the acquiescence scale; in other words, those who cheated denied negative attributes but did not necessarily assign positive attributes to themselves. The image presented by high approval subjects represents

... defensive behaviour designed primarily to forestall rejection. These evaluatively dependent individuals are not so much oriented towards actual social meaning of their behavior (e.g., cheating = undesirable), but rather are intensely concerned with the evaluative consequences of their behavior. The socially and morally conforming image often associated with such individuals most likely occurs because social uniformity is usually the easiest way to avoid disapproval (Millham, 1974, p. 391).

The individuals who scored high on social desirability, particularly those who scored high on the denial sub-scale, were not concerned about the social acceptability of their behavior (cheating) but with avoiding the social condemnation associated with failure. Millham (1974) indicates that if detection of the untruthful response is not viewed as likely, the respondent will violate the social norm, especially if there is a perceived personal benefit to violating the norms (eg.. avoiding censure or negative evaluation). He stated, "... the motivations are primarily defensive and avoidant; the aim is to avoid censure and not to obtain approval"

(p. 391). It appears that high approval individuals, particularly those scoring high on the denial sub-scale, are not concerned with the social appropriateness of their behavior for its own sake, but only with creating an image of social appropriateness in order to to avoid detection or censure. Brannigan (1977) in a review of research on the Marlowe-Crowne social desirability questionnaire indicates that, "It appears that there is considerable support for a defensiveness interpretation of approval-motivated behavior" (p. 1157).

It is generally anticipated that offenders who are being evaluated will attempt to avoid censure and will respond defensively. Nearly all self-report measures have been demonstrated to be subject to social desirability responding although Furnham and Henderson (1982) found that self-report measures with low face validity, or which are multi-dimensional, are less susceptible to "faking good". Another tactic for reducing social desirability responding to a questionnaire includes changing the response format, for example, asking the respondents how they would react if they were in the situation rather than asking them to provide a rationalization or justification for the behavior (Buss and Durkee, 1958). It is also possible to administer a measure of the respondent's tendency to respond in a socially desirable manner and then to change the scores in the other test or the interpretation of the results on the other test(Anastasi, 1988).

The second bias which may affect the responses to the ABC scale is acquiescence. Acquiescence is "... conceptualized as a continuous variable; at one end are consistent 'Yeasayers' and at the other consistent 'Naysayers' " (Anastasi, 1988). Instead of responding to the content of the individual items, subjects show a pattern of endorsing all items with either "strongly agree" or "strongly disagree". Some subjects show this response set if they do not understand the items; others stop reacting to the content of the individual items once they determine what appears to be a pattern of "right answers". For example, if all the answers to the items on the first page are "1", the answer to all the questions on the second page is "2" and the answer to the first two items on third page is "3", the subject may endorse "3" as a response to all of the items on the third page without reading them.

The purpose of this study was to modify the ABC scale so that it would elicit less defensive responding in offenders. This was done in two ways. First, the RABC items were written to be less transparent by adding justifications to the items. As well, victims' reactions were written to be non-discriptive in some of the items. Second, to disguise as much as possible the purpose of the test, the critical items were offered along with related but non-critical items.

The tendency for offenders to acquiescence in responding to questionnaires was reduced by keeping the items short, clear and varying the keying of the items.

Ethical considerations in conducting research on attitudes towards adultchild sex

Researchers interested in sexual attitudes, particularly attitudes about sexual assault, must be sensitive to the feelings subjects may have when they participate in such such research. Wiesenthal (1990) notes that researchers in the area of sex and aggression,

... have signaled their scrupulous concern over ethical matters. Perhaps researchers in "hot" areas feel compelled to justify their actions in an effort to prevent or forestall objections from others (p. 21).

While such sensibilities on the part of researchers are important, it would be unfortunate if researchers in this area felt so burdened by such considerations that they left the field. Abel, Becker and Cunningham-Rathner (1984) suggest that the exploration of this area has proceeded slowly "... because of strong sanctions against discussions of sexuality and especially the sexual behavior of children" (p. 90). They indicated that this reluctance has inhibited the understanding and exploration of

cognitive distortions in child molesters and makes it difficult to develop a questionnaire which will identify non-admitting child molesters. A "healthy" balance between sensitivity and the need to know suggests that researchers should consider carefully not only what could adversely affect the participants in this type of research but also the general good which may arise from it. Research designs which minimize or eliminate the possible discomfort of the participants should be employed, and when this is not possible, the researcher should successfully deal with any discomfort experienced by the subjects. Similarly, the importance of the information gained should be considered. The four major areas of ethical concern when carrying out research in this area are as follows:

(a) informed consent; (b) exposure to the experimental materials causing discomfort; (c) confidentiality; and, (d) exposure to the cognitive distortions leading to the belief in the distortions.

Informed Consent

The issue of informed consent is extremely important in such studies. Subjects must be fully aware of the nature of the study before they begin to participate. To achieve this goal, subjects must be clearly told what they will read or see and must be given specific examples of the material. To maintain informed consent, subjects must also be offered the option of quitting the study at any time. Participants must also be told that they may experience some discomfort; they should not be required to

"discover" this discomfort. Finally, subjects should be discouraged from participating if there is any possibility they could be upset or hurt by reading the items.

Exposure Causes Discomfort

There is a possibility of subjects experiencing discomfort when they read materials which describe inappropriate attitudes regarding adult-child sexual behavior. Some individuals will be disturbed because of their own experiences in this area, for example, a participant may have been assaulted, or may know someone who has been assaulted. The possibility of this happening should be reduced by clearly briefing the participants prior to arrival, and by having the participants actually read several items prior to completing the scale.

The researcher must also consider the size of the reward offered for participating in the study. A large monetary reward might encourage subjects to participate even though they think that there is a good chance that they will be discomforted. The reward should be a token of appreciation by the experimenters, large enough to make the subject feel good about participating but, not so large that the subject cannot comfortably walk away from the offer.

Researchers should take the time and effort to identify any discomfort experienced by subjects and then to address it by acknowledging the discomfort, labeling it as normal and referring people to counsellors, if required.

Confidentiality

The issue of confidentiality is extremely important: Subjects are being asked to reveal their opinions about adult-child sex and these opinions are relevant to one's morality, religion, and relevant to law enforcement. The subject's privacy must be respected and there should be a sound means of ensuring confidentiality. Subjects should be made aware of exactly how the information will be handled to ensure confidentiality.

Exposure Leading to Belief in Cognitive Distortions

Subjects must be discouraged from concluding that the experimenter or society supports the attitudes which represent distorted cognitions about adult-child sex. Subjects must be convinced that such distortions are unacceptable and can never justify assault (Check and Malamuth, 1984). The debriefing should make it clear that these distortions are unacceptable rationalizations which contribute to the victimization of children.

In summarizing their review of ethical considerations, Check and Malamuth (1990) indicate that, with respect to sex research in general, studies which employed the following guidelines almost uniformly report that the subjects who participated found their experience "... to be positive and devoid of any negative experience" (p. 27). They also note that participation in research in which subjects were exposed to a rape depiction and which was followed by a debriefing, actually reduced the subjects' acceptance of rape myths. The safeguards are as follows:

- (a) Work only with volunteer subjects who are fully aware of the procedures to be used in the research.
- (b) Do not exert pressure on subjects to volunteer.
- (c) Subjects must be fully aware of all aspects of the study. Do not gain their cooperation for one task and then ask them to do another. Subjects should not participate in any new activities as part of the research to which they have agreed.
- (d) Subjects must be free to leave at any time, for any reason, and without penalty whatsoever.
- (e) A debriefing must be provided to explain any procedures that may have involved deception (Check and Malamuth, 1990).

Summary

The current research involved a revision of the ABC (RABC) scale in order to improve its measurement of cognitive distortions in sexual offenders, and by reducing social desirability responding. In addition, a measure of the respondent's tendency to present themselves as socially desirable, the Marlowe-Crowne, was included, even though the community volunteers were not expected to respond in a defensive manner. No significant relationship was expected between the Marlowe-Crowne and the RABC.

Acquiescence, as a response set to the ABC, was also considered. The tendency of the ABC to elicit this response set was reduced by writing items which expressed desirable and undesirable attitudes about adult-child sex, for example, "A child 9-12 years old cannot consent to sex with an adult" and "When children watch an adult masturbate, it helps the child learn about sex".

The research was conducted in two stages. In the first of two studies comprising the thesis, items were written to be less extreme in social desirability than the ABC scale items. Community volunteers were asked to rank the social desirability of an individual expressing the attitudes represented by this new pool of items. This study provided a pool of items useful in revising the ABC scale.

Apart from constructing the new questionnaire, there was also interest in differential ratings amongst groups who differed in their experience of and relationship to child sexual assault. Twenty volunteers from agencies involved with the issue of sexual assault were included in the first study. It was expected that the professional group, with its greater awareness of the issues involved in adult-child sexual contact, would rate the items differently than the community group. It was also anticipated that females would rank the undesirable items as being significantly more socially undesirable than males.

The second study revised the ABC scale, in order to reduce the effects of response bias, in the following way: (a) items were selected from the first study which were less "transparent" in terms of social desirability, or which, while undesirable, were not as extremely undesirable as those on the ABC scale; (b) attitudes were written as affirmations of attitudes in favour of adult-child sex and as disconfirmation of such attitudes; and, (c) the critical items were items with similar but non-critical content taken from other scales (This was done to make it less clear to the respondent what was being measured.).

The first objective was achieved by selecting items from the pool of items rated, in study one, by the community volunteers as being undesirable but not extremely undesirable. The second objective was accomplished

by grammatically negating the attitude expressed by some items, for example, "Adult child sexual contact is OK" became "Adult child sexual contact is not OK". The last objective was achieved by selecting items from questionnaires which are similar to the ABC scale, for example, from the Attitudes Towards Women (Kilpatrick and Smith, 1974; Spence and Helmuch, 1973) and Hostility Towards Women scales(Check, 1985), but which did not measure sex between adults and children and adding them to the critical items.

Study 1 and Study 2

Procedure

Two studies comprise the thesis. In study one, subjects rated the social desirability of individuals who showed various cognitions about sex between adults and children. The second study determined the number of community volunteers who agreed with or endorsed various items expressing attitudes about sex between adults and children. Subjects were recruited, briefed, and debriefed in the same manner for both studies.

A newspaper ad (see Appendix A) was placed in two local daily newspapers advertising for volunteers to participate in a psychology study at Saint Mary's University. An individual, who responded to the newspaper ad by telephone and agreed to participate after being briefed (see Appendix B), was asked to come to Saint Mary's University and complete a questionnaire. On arrival at the testing site, the participant was briefed again (see Appendix B), and asked to read and sign a consent form (see Appendix C) which included examples of the items. The subjects filed out questionnaires individually, which generally

required 25 minutes of their time, and were paid \$5.00 as a token for their time and effort.

Asking a subject to rate the social desirability of statements describing attitudes, feelings and thoughts about sex between adults and children or, especially, asking subjects to agree or disagree with such statements can be discomforting. The ethical safeguards instituted for this research ensured that the highest ethical standards were maintained throughout the studies.

The most relevant ethical issues are the following: 1) informed consent; 2) confidentiality; 3) the possible discomfort which subjects might experience by exposure to the experimental materials; and, 4) the legitimization of the cognitive distortions regarding adult-child sex. The specific steps instituted to address these ethical concerns were as follows:

- 1) The ad clearly stated that the participants would be involved in psychological research involving questionnaires.
- 2) Each participant who telephoned was briefed as to the purpose of the study and the nature of the items before the potential subject was asked to consider participating. Potential subjects were discouraged from

participating if they had any concerns about the discomfort they might experience in participating.

- 3) Individual appointments were made for those who wished to proceed. The subjects completed the questionnaires alone in a small office, with the experimenter in the next room to answer the subjects' questions. To ensure that the experimenters could not identify individual respondents, the completed questionnaires were immediately placed in a box containing the other completed questionnaires.
- 4) All participants who arrived at the testing site were again briefed and cautioned against participating if the three sample items which were shown to them caused them any concern. Each participant was asked to read and sign a written consent form which indicated that he or she understood the briefing and that any and all of their questions had been answered. The monetary reward of \$5.00 was purposely small so that it could not be a major inducement to subjects to engage in a task which was discomforting. Indeed it was made clear that the five dollars would be paid to the subject even if he/she withdrew, before completing the questionnaire.
- 5) Smith and Richardson (1983) found that subjects experienced no ill effects to being exposed to pornographic materials if a proper debriefing procedure was used. The debriefing in the current studies included

answering any and all questions about the scale and explaining the purpose of the study.

Each participant also received a written debriefing (see Appendix D) and was given information on the potential social benefit of the study and how to obtain the final results of the study. Most importantly, the harm caused by adult-child sexual contact was discussed. Subjects were told immediately after completion of their participation in the study that certain items on the questionnaire represented distorted and unacceptable thinking about sex between adults and children.

6) Subjects can be made uncomfortable from exposure to such items in two ways: Just reading the distorted attitudes about sex between adults and children might cause revulsion in subjects; and, subjects might be made uncomfortable when they realize, after completing the questionnaires, that they had agreed with statements which expressed distorted attitudes about sex between adults and children. Debriefing were individual to increase the likelihood that a subject would report discomfort and increased the opportunity to observe discomfort in the subjects. There was a clear strategy for responding to concerns or reports of discomfort. The participants were made aware that Mr. S. Cann or Dr. Robert Konopasky were available should they want to talk with someone. As well, the address and phone numbers of a local

agency involved in assisting victims of sexual assault was made available to them.

No participant reported experiencing discomfort. Several subjects were curious as to the nature and purpose of the research, but none reported any concerns.

Study 1

Method

Subjects

A total of 48 subjects, 32 males and 16 females, volunteered. Of the 48 subjects, 20 were professionals from the Nova Scotia Area parole office, who deal with sex offense cases. The mean age of the subjects was 36.88 with a standard deviation of 10.48. Six point two five per cent of the subjects had less than grade 9 education, 6.25% had grade 9 to 12 education; 6.25% completed high school, 35.42% had some college or university education, 35.42% were college graduates, and 12.5% had a graduate degree.

Procedure

The parole officers were not recruited through newspaper ads. Instead, the local Correctional Service of Canada office managers were contacted, and their approval to circulate a memo, which was the same as the newspaper ad (Appendix A), was obtained. Those subjects who responded to the memo were individually briefed, filled out the questionnaires in their own offices, were individually debriefed, and were paid \$5.00 for their participation.

The 48 community and professional volunteers were asked to rank 95 items (see Appendix E) for social desirability on a 9-point Likert Scale.

Item Construction

The goal in writing items for the new scale and modifying items taken from the ABC scale was to develop items which would elicit less defensive responding in sexual offenders. It was expected that items which offered justifications, provisos, or conditions of the cognitive distortions would be accepted at face value by offenders and that offenders would respond to the content of the items truthfully. On the other hand, it was expected that non-offenders would "see through" the justifications and reject the items. It was also expected that the iustifications would result in items which were not considered so extremely undesirable by both offenders and non-offenders. It was hypothesized that the shift in perceived desirability, from "extremely undesirable" to "undesirable", would be small for the community volunteers but significant for offenders. It is hypothesized that the shift for offenders might be from "extremely undesirable" to "neutral" or even "desirable". A pool of 95 items (see Appendix E), was drawn together which consisted of the factor I items of the ABC Scale (see appendix F). modified items from ABC scale, and items written by the experimenter.

The modification of the ABC items and the writing of new items was consistent with the following suggestions of Buss and Durkee (1957). Abel et al (1989) and Stermac et al (1990): (1) describe the sexual activity as having taken place rather than an activity which may take place: (2) provide justification for the occurrence of the sexual behavior between the adult and the child, for example, by indicating that the behavior satisfied the child's curiosity; (3) indicate that the sexual activity had a positive or neutral effect on the victim; (4) describe the reaction of the victim as ambiguous; (5) vary the age of the victim, for example, include examples of sex between adults and 13 year old children as well as younger children; (6) indicate that the victim had had sexual experience before the sex between the adult and the child; (7) include examples of sexual touching rather than have all items refer to intercourse; (8) indicate that the child consented or at least did not object to having sex; (9) vary the relationship between the child and the adult. for example, daughter or step-daughter; and (10) distinguish between physical and mental harm, suggesting that there may have been some mental harm but there was no physical harm.

Results

The questionnaires completed by the professional group were numbered and identified with a "p" while the community controls were only numbered. The social desirability ratings of each participant were totaled

and the mean totals for the professional and community groups were compared using a Mann-Whitney U test (Siegal and Castellan, 1988), the non-parametric equivalent of an independent t-test. There were no significant differences between the total scores for the professional and community groups. The mean rating of each item was compared using a Mann-Whitney U test; there was only one significant difference, at the .05 level, in the ratings by the two groups for one of the 95 items, an outcome expected by chance.

There was no significant difference in mean total scores for the male and female respondents. The individual item means of the two groups were compared and, again, there were only three significant differences, at the .05 level, an outcome expected by chance. The scores of the two groups were pooled and became the community group. The means and standard deviations of the social desirability ratings of the RABC items are presented in Table 1.

Table 1
Social desirability ratings for items selected for RABC

Item	Mean	Mean S.D. Number of respondents rating each item					em				
			1	2	3	4	5	6	7	8	9
03	7.17	1.88	00	01	03	02	01	04	16	05	16
06	2.44	2.66	29	10	01	00	00	01	02	00	05
8a	8.04	1.99	02	00	02	00	01	00	00	14	29
8b 11	8.04 7.02	1.99 2.18	02	00	02	00	01	00	00	14	29
12	4.12	3.72	00 25	02 03	04 01	01 00	05 00	03	07	09	17
13	7.56	1.99	01	00	01	03	03	00 03	00 80	07 03	12 26
16	7.17	2.47	03	02	01	01	03	03	08	08	21
19	7.67	1.68	00	02	00	01	01	64	07	15	18
23	4.06	3.48	22	05	01	01	00	01	02	08	08
28	8.19	1.28	00	00	00	02	01	03	00	16	26
29	2.67	2.10	17	13	07	05	01	01	01	01	02
30	8.15	1.60	01	00	01	00	01	02	02	13	28
31	2.21	2.31	27	13	02	01	00	00	00	03	02
32	2.96	2.28	17	11	04	06	03	02	02	01	02
38	7.79	1.69	00	01	01	00	05	01	04	14	22
39	7.94	1.71	01	00	00	00	06	01	03	10	27
40	8.00	1.41	00	00	00	03	01	02	05	13	24
49	8.38	1.45	00	01	01	00	01	00	02	09	34
54	7.69	1.56	00	00	01	00	07	01	07	12	20
57	8.46	0.87	00	00	00	00	01	01	03	13	30
60 62	8.00	1.49	00	01	01	00	01	01	07	14	23
66	6.85 3.65	2.43 3.22	01	01	07	00	06	01	05	09	18
72	3.56	3.22 3.15	19 22	09 06	04 02	01 02	02 03	00 00	00 03	05 03	08 07
74	3.17	2.95	24	07	01	03	03	01	02	03	07 05
79	3.29	2.44	15	07	09	05	05	01	00	03	03
80a	3.06	2.93	25	08	01	01	01	01	93	05	03
80b	3.06	2.93	25	08	01	01	01	01	03	05	03
82	2.35	2.44	27	12	01	01	01	00	01	02	03
83	8.58	0.74	00	00	00	őö	00	00	07	06	35
86	3.79	3.11	20	04	03	02	07	00	02	02	08
87	5.10	3.05	05	07	10	01	07	00	01	03	14
88	8.50	1.03	00	00	01	00	00	00	04	10	33
89	8.38	0.96	00	00	00	00	02	00	04	14	28
95	3.15	2.47	18	07	67	02	80	00	01	02	03

Discussion

Apparently, respondents found some of the items confusing, rating them as both highly desirable and highly undesirable. Some respondents appeared to react to the desirability of the sexual behavior described in some items and not to the desirability of an individual showing the attitude expressed by the item. For example, many respondents rated the statement, "The sexual education of children should not involve the viewing of an adult's sex organs or having sex with the adult" as socially undesirable. Technically, these subjects indicated by their rating that it would be desirable for an adult to educate a child about sex by showing them adult sex organs or by having sex with them. Actually the respondents believed that children should not be shown adult sexual organs and should not have sex with an adult in order to gain sexual education but, apparently, became confused by a combination of the instructions and the phrasing of the item. These subjects wanted to make clear by a negative rating that this kind of sex between adults and children was undesirable. During the debriefing, several subjects commented on the difficulty experienced in rating the social desirability of the items which, grammatically, disconfirmed the attitude that sex between adults and children was acceptable. When asked what about the instructions and the items was confusing, they indicated that they could not decide if it was the behavior they were to rate, for example, touching children for educational purposes or the adults who show the

attitude expressed by the item. They did not have this problem with the undesirable items, for example, "An adult fondling a young child or having the child fondle the adult will not cause the child any harm".

Study 2

Method

Subjects

Fifty-four respondents to the newspaper ad, 33 males and 21 females, completed questionnaires which asked them to indicate whether or not they agreed with statements which represented cognitive distortions about sex between adults and children. Demographic statistics of the subjects are presented in Table 2.

Table 2

	and the state of t
Age	
mean	30.07%
S.D	09.24%
Employment	
employed	61.11%
full-time	38.89%
part-time	61.11%
Income	
less than \$25,000	79.63%
\$25,000 - \$40,000	14.81%
over \$40,000	05.56%
Education	
9-11	14.81%
high. School.	22.22%
some college	16.67%
completed degree	31.48%
graduate degree	12.96%

Procedure

In study two, the volunteers were recruited and tested in the same manner as the first study. The respondents completed the RABC scale (see Appendix F), the ABC scale (see Appendix G), and the Marlowe-Crowne social desirability questionnaire (see Appendix H). The order of presentation of the three tests was randomized for each participant.

Scale Construction

A frequency distribution, mean and standard deviations of social desirability ratings for each item had been obtained in Study 1 (see Table 1). The following criteria for selecting items for the RABC scale were employed: (a) ABC, factor 1 items were retained; (b) six items whose social desirability were rated as highly desirable by over 80% of the respondents from study 1 were included as a "balance" for the extremely undesirable ABC scale factor 1 items; and, (c) 24 "subtle" items from study 1 which had social desirability ratings which were not as extremely negative or positive as the factor 1 items were included. Items were considered subtle if 75% of the respondents rated the item between 2 and 8 on a 9 point Likert scale.

All items which were rated highly desirable by a significant number of subjects when the item was obviously undesirable (and the reverse)

were eliminated. It is possible, but unlikely, that this sample of the community believed that pro-adult-child statements on sex are desirable. Perhaps the utility of these items could be saved if the instructions were rewritten.

The respondents experienced confusion when responding to some of the desirable items. The following items were clarified and including them in the final scale:

- 12. Having sex with a child is not an acceptable way to show my love and affection (item 42 on final scale).
- 23. An adult fondling a young child or having the young child fondle the adult can cause the child harm (item 7 on final scale).
- 66. Just because a child does not show an immediate reaction to sexual contact with an adult, does not mean that there will be no long term effect on the child (item 65 on final scale).
- 72. The sexual education of children should not involve viewing the adult's sex organs or having sex with the adult (item 35 on final scale).

- 74. "Rough housing" with children is not an opportunity to make any form of sexual contact (item 56 on final scale).
- 80. A child 13 years old (or younger) cannot consent to sex with an adult (item 37 and 71 on final scale, as the age of consent was split into 11-13 and 10 or younger).
- 87. A child will have sex with an adult even if the child does not want to (item 47 on final scale).

In summary, the RABC (see Appendix F) was comprised of 14 desirable items and 22 undesirable items. Of the 14 desirable items, 6 had been rated as extremely desirable while the other 8 were rated as closer to neutral in social desirability. To determine whether the items selected for the RABC scale were less negative than ABC, factor 1 items, the social desirability ratings for both groups of items were compared. The mean rating of the social desirability of the ABC scale factor 1 items was 8.25 with a standard deviation of .19. The mean social desirability rating of the remaining items was 7.02 with a standard deviation of 1.06. Five groups of 6 critical RABC items were created and compared with the factor 1 items using the Wilcoxon signed ranks test (Siegel and Castellan, 1988). The ABC scale factor 1 items were rated as being significantly more negative at the .05 level of significance than each of the 5 groups of 6 items. These 36 items were added to 35 items from the

Attitude Towards Women (see Appendix I) and Hostility Towards Women scale (see Appendix J). The order of the 71 items was randomized.

Results

Endorsement of ABC items was scored and totaled. As the ABC scale items all represent affirmations of the acceptance of sex between adults and children and subjects use a 5-point Likert scale, range from "1, strongly agree" to "5, strongly disagree", the lower the total score for each subject, the greater the agreement with items which represent cognitive distortions about adult-child sexual contact.

Since the RABC scale (see Appendix F) was comprised of items which asserted the acceptance of adult-child sex and those which rejected adult-child sex, the scoring of the responses was arranged so that the meaning of high and low scores would be consistent with the ABC. The scores assigned to the various levels of endorsement of the items which disconfirmed the acceptance of adult-child sex, such as, "A child 13 years old (or younger) cannot consent to sex with an adult" were reversed: If a respondent strongly agreed with this statement, the response of "1-Strongly agree" was scored as "5". For both the ABC and the RABC then, the lower the score, the greater was the subject's agreement with items representing cognitive distortions about adult-child sexual contact.

As the number of items on the two tests differed, and as the maximum score on the RABC scale was 180 compared to the maximum score of 140 on the ABC scale, a simple comparison of absolute scores on the two scales was not possible. The absolute score totals for the RABC scale were modified to be consistent with the ABC scale by multiplying each RABC total score by a constant of .7777778.

The endorsement data for the ABC scale, the modified endorsement data for the RABC scale and the Marlowe-Crowne are presented in Table 3.

Table 3

Descriptive statistic for the ABC, RABC and Marlowe-Crowne

	Mean	SD	Range	Min.	Max.
ABC	129.52	10.88	46.00	94.00	140.00
RABC	117.31	11.82	53.67	80.89	134.56
MC	015.65	06.64	25.00	01.00	026.00

A Mann-Whitney U test was employed, to compare the mean total scores of males and females on the Marlowe-Crowne, the ABC and the RABC

scales: There was no significant difference for gender. Responses by men and women to the individual RABC scale and ABC scale items were also compared, using the same test. There was only one significant difference found in all of these individual item comparisons, an outcome expected by chance. The results for males and females were then pooled and became the community group.

The Marlowe-Crowne questionnaire was scored in the normal manner: Respondents received a point for each socially desirable but highly unlikely item which they endorsed, and one point for each socially undesirable, but highly likely item they indicated was false. High scores were interpreted as indicating the respondent's intention to present himself/herself as possessing socially desirable traits or qualities.

In addition, the two sub-scales of the Marlowe-Crowne, acquiescence, the attribution of positive but highly unlikely behaviors, and denial, the denial of negative but common behaviors, were scored separately. A Mann-Whitney U test was used to compare the sub-scale scores of males and females on the Marlowe-Crowne social desirability questionnaire. There was no significant difference between the mean sub-scale scores of males and females nor were there significant differences to individual items on either of the sub-scales by males and females.

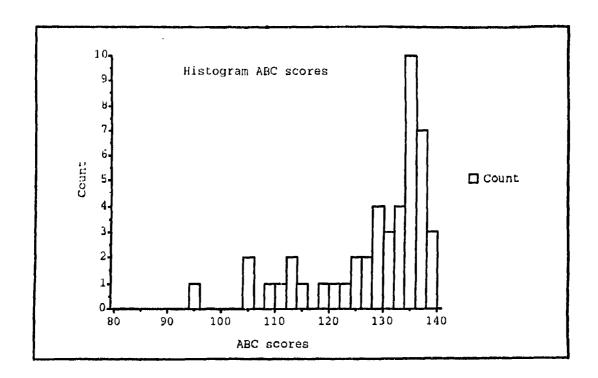
Sixty four per cent of the respondents' total scores on the ABC scale (see Table 4) fell between 129.5 and 140, with 14.8 per cent of the respondents scoring the maximum, or 140, on the ABC scale. Clearly, the community volunteers rejected the highly undesirable cognitive distortions about adult-child sexual contact offered in the ABC scale.

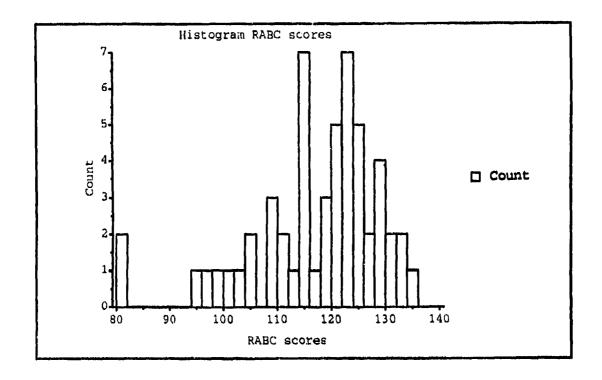
The results were somewhat different for the RABC and are presented in Table 4: On this test only 12.96 per cent of the respondents to the RABC scored between 129.5 and 140; and no respondent achieved the maximum score. Even though the community volunteers continued to reject these items, which also expressed cognitive distortions about sex between adults and children, the rejection rate was not as extreme.

Table 4

Frequency distribution of total scores on the ABC and RABC

Range		ABC	RABC
From: (≥)	To: (<)	Percentage	Percentage
079.5	089.5	00.00	03.70
089.5	099.5	01.85	03.70
099.5	109.5	05.56	11.11
109.5	119.5	09.26	27.78
119.5	129.5	18.52	40.74
129.5	139.5	50.00	12.96
139.5	149.5	14.81	00.00





Responses to the ABC scale items were extremely, negatively skewed; the skewing of responses to the RABC scale was not so extreme (see Figure 1). The items for which more than 15% of the responses fell on the inappropriate side of "3", that is, which subjects endorsed with strongly disagree when the item was stated positively (see Table 5) were: 31; 35; 37; 38; 47; 53; 63; and 65 (the "N" and "P" indicates if the item was stated positively or negatively).

Table 5

Frequency distribution of responses to RABC items

Item number		percentage of subjects endorsing each score					
	1	2	3	4	5		
p02	48.15	25.93	12.96	03.70	09.26		
n04	00.00	00.00	03.70	12.96	83.33		
p07	53.70	33.33	07.41	01.85	03.70		
p08	29.63	51.85	14.81	03.70	00.00		
p11	64.81	27.78	05.56	00.00	01.85		
n12	01.85	05.56	14.81	25.93	51.85		
n14	00.00	00.00	00.00	16.67	75.93		
n16	00.00	01.85	09.26	24.07	64.81		
n19	00.00	00.00	05.56	20.37	74.07		
n21	00.00	01.85	07.41	46.30	44.44		
p23	42.59	44,44	05.56	07.41	00.00		
n26	07.41	07.41	07.41	24.07	53.70		
n27	01.85	01.85	11.11	27.78	57.41		
n29	00.00	05.56	14.81	25.93	53.70		
n31	05.56	11.11	07.41	27.78	48.15		
n34	00.00	01.85	05.56	11.11	81.48		
p35	44.44	20.37	07.41	12.96	14.81		
p37	50.00	27.78	07.41	11.11	03.70		
n38	01.85	12.96	20.37	20.37	44.44		
n40	00.00	07.41	07.41	09.26	75.93		
p42	66.67	25.93	00.00	01.85	05.56		
n44	00.00	00.00	07.41	24.07	68.52		
p47	03.70	38.89	16.67	11.11	29.63		
n49	01.85	05.56	07.41	25.93	59.26		
n51	00.00	01.85	05.56	20.37	72.22		
n53	12.96	16.67	25.93	27.78	16.67		
n55	01.85	03.70	03.70	16.67	74.07		
n56	01.85	03.70	03.70	16.67	74.07		
p58	50.00	25.93	14.81	9.26	00.00		
n60	00.00	01.85	07.41	25.93	64.81		
n61	00.00	01.85	07.41	20.37	70.37		
p63	16.67	35.19	24.07	20.37	03.70		
p65	33.33	35.19	05.56	11.11	14.81		
n68	00.00	03.70	07.41	14.81	74.07		
p70	25.93	44.44	22,22	05.56	01.85		
p71	61.11	24.07	03.70	05.56	05.56		

Relationship between the ABC and RABC scores

The Spearman rank order correlation (Siegal and Castellan, 1988) between the ABC and the RABC scales scores was significant (Rho =.75, p ≤.0001). The finding of a highly significant correlation was noteworthy considering that the distribution of scores for one of the measures, the ABC, was severely skewed (see Figure 1): Sixty four per cent of the respondents' total scores on the ABC were between 129.5 and 140, with 14.8% of the respondents scoring the maximum of 140.

The mean scores of the ABC scale and the RABC scale were compared to determine whether there was a significant difference in the overall endorsement of the items on the two tests. A Wilcoxon signed ranks demonstrated that the mean total score of 117.31 on the RABC was significantly lower than the ABC mean score of 129.52 ($p \le .0001$).

Responses to the ABC, factor 1 items were compared with the responses to the same items when they included in the RABC scale: The mean response to the factor 1 items on the ABC scale was 4.70 while the mean for the same items on the RABC scale was significantly lower at 4.56 (p = .0021).

Responses to factor 1 items of the ABC, which were included in the RABC, were also compared with responses to the other subtle negative

items comprising the RABC scale. These "subtle" items were placed randomly into 3 groups of 6 items and compared by employing the Wilcoxon signed ranks test. The rejection rate of factor 1 items was significantly less extreme than rejection rates for each of the three groups of subtle negative items (p = .002; p = .013; $p \le .001$).

Social desirability responding

There are two methods of measuring the effect of the social desirability of items on endorsement of the items. One examines the relationship between the mean social desirability ratings of the item and the mean endorsement of the items comprising a questionnaire. A Pearson Product Moment Correlation coefficient of .77 ($p \le .0001$) between mean social desirability ratings of 26 items obtained in study one and the mean endorsement of these same items on the RABC scale in study two was highly significant and large.

The second method examines the relationship between the respondents' tendency to present themselves as socially desirable on one test and their endorsement of items on another. The relationships among the Marlowe-Crowne, a measure of social desirability responding, and scores on the ABC and the RABC scales are presented in Table 6. The Spearman rank order correlation coefficient calculated by comparing the RABC scores and the Marlowe-Crowne scores was not statistically

significant at the .05 level (Rho = .26, p = .0607) nor was the correlation co-efficient comparing the ABC and the Marlowe-Crowne scores (Rho = .11, p = .4267).

The Marlowe-Crowne social desirability questionnaire can be scored for the two sub-scales, acquiescence and denial, as well as a grand score. The acquiescence sub-scale is comprised of those items which describe desirable but uncommon behaviors and the denial sub-scale which is comprised of those items which describe undesirable but common behaviors. The Spearman rank order coefficient calculated by comparing the two sub-scales, acquiescence and denial was significant $p \le .001$; the correlation between acquiescence and the Marlowe-Crowne was significant $p \le .001$ and the the relationship between denial and the Marlowe-Crowne was significant $p \le .001$ (see Table 6). In addition, correlation coefficients were calculated by comparing all combinations of the Marlowe-Crowne sub-scales scores, the ABC scores, the RABC scores and the overall Marlowe-Crowne scores. None were significant.

Table 6

Spearman rank order correlation coefficients

Scale	MC	Denial	Acquiescence	
ABC	.11	.16	01	
RABC	.26	.23	.20	
Acquiesce	.85**	.54**		
Denial	.88**			
** Significar	it at the .	001 level		

In addition to the relationship between these two sub-scale scores and the overall RABC scores, coefficients between the two sub-scales and the pro-adult-child sex items and anti-adult-child sex items of the RABC were calculated separately. The relationship between the denial subscale and the anti-adult-child sex items was r=.08 and for the pro-adult-child sex items was r=.21: neither correlation coefficient was significant. The relationship between the acquiescence sub-scale and the anti-adult-child sex items was r=.21 and r=.04 with the pro-adult-child sex items, neither correlation coefficient being significant.

The mean scores on the two sub-scales of the Marlowe-Crowne were compared using a Wilcoxon signed ranks test for correlated groups to determine if there was a significant difference in the endorsement. As the number of items on the two sub-scales differ, there are 17 "desirable but uncommon" (acquiescence) and 16 undesirable but common behaviors (denial) items, the absolute scores of the two sub-scales could not be compared directly. The scores for the denial sub-scale were multiplied by a constant 1.0625 to compensate for this difference between the number of items in each sub-scale; the mean score of 10.26 for the acquiescence sub-scale was significantly larger than the mean score of 5.71 for the adjusted denial sub-scale ($p \le .0001$).

Respondents were divided into three groups according to their scores on the Marlowe-Crowne scale. The high social desirability group was made up of those having scores which fell more than 1.00 standard deviation above the mean, the low social desirability group had scores which fell 1.00 standard deviation or more below the mean, and the score of the medium social desirability group fell between +1.00 and -1.00 standard deviation from the mean. The high and low social desirability groups' mean scores on the ABC and the RABC, compared using a Mann-Whitney U test, were not significantly different. The difference in RABC scores for the high and low social desirability groups approached but feil slightly short of significance at the .05 level (see Table 7).

Table 7

Comparison of ABC and RABC scores in high and low social desirability groups

Test	Group	Number	ΣRank	Mean Rank	Significance
ABC	High	12	140.5	11.71	p = .8691
	Low	10	112.5	11.25	
RABC	High	12	166.5	13.88	p = .0596
	Low	10	86.50	08.65	

Acquiescence

The tendency of the respondents to either "Yeasay" or "Naysay" on the RABC and ABC was examined. A frequency distribution of the 54 subjects' responses to the pro-adult-child sex items and the anti-adult-child sex items on the RABC were examined. An example of an anti-sex item is "The sexual education of children should not involve viewing the adult's sex organs or having sex with the adult" and an example of a prosex item is "Having sex with a child is a good way for an adult to teach

the child about sex". None of the respondents consistently responded to the 14 anti-sex items with either "1" or "5". The same was true of the 22 pro-sex items. As previously mentioned, no subject obtained the maximum total score on the RABC. On the ABC, on the other hand, 8 of 45 individuals responded to every item with "strongly disagree".

Discussion

The intent of the study was to revise the ABC to make it less susceptible to defensive responding and response bias. Specifically, items, which describe cognitive distortions about adult-child sex, were written, or ABC items were modified to offer a justification for the aberrant sexual behavior described in the items. In addition, the scoring of specific responses to the RABC varies depending on whether the item describes an attitude which is pro-adult-child sex or one which is anti-adult-child sex. It is expected that offenders would accept the various justifications at face value and agree with the items. On the other hand, it is expected that non-offenders would not be affected by the justifications, would continue to see the attitudes as inappropriate and would reject the items. The items were added to other similar but non-critical items to disguise the purpose of the scale.

Response sets

The RABC effectively reduced the effects of acquiescence: The subjects did not consistently choose the same extreme ratings on the 5-point Likert scale. Having added items which expressed desirable attitudes about sex between adults and children to those which expressed undesirable attitudes, subjects had to use the full range of the Likert scale to express their agreement or disagreement with the attitudes.

The revision of the ABC was successful in reducing the tendency of this test to elicit social desirability responding. Most of the items, other than the 8 extremely undesirable, ABC factor 1 items and the 6 extremely c'esirable written to balance the undesirable items, had social desirability ratings which are closer to neutral than the ABC items. Significantly, the subjects rejected less strongly those items which reflected cognitive distortions about adult child sex on the RABC than the extremely undesirable attitudes on the ABC. In addition, the range and variance of endorsements of RABC items was greater than the range and variance of the ABC; the distribution of responses to the RABC more closely approximates a normal distribution than the responses to the ABC.

The Marlowe-Crowne scores were not significantly correlated with the scores on either the ABC nor the RABC, although the correlation with the RABC scores approached significance.

Even though the correlation between the Marlowe-Crowne and the RABC is not significant, this correlation was much greater than the correlation between the Marlowe-Crowne and the ABC scores, and approached significance. One explanation for the weaker relationship between the ABC and the Marlowe-Crowne scores is the extreme skewing of ABC responses and the low level of variance in the ABC responses compared with RABC responses. The skewedness of the ABC scores and the reduced variance of the responses resulted in a spuriously low estimate of the relationship between the Marlowe-Crowne and the ABC scores (MacCall, 1986; Rosenthal and Rosen, 1984).

Why is the range of the responses curtailed and why is the distribution skewed? Respondents, apparently, "figure out" that there is one "right" answer to the ABC and make that response to every item without close reading the item. When respondents routinely respond "strongly disagree" to every item, they are not be responding to the content of the items nor even to the social desirability of those items; they are responding to an item without knowing what it says. This pattern of responding, also the variance in responses, skewed the distribution of

responses and reduced the relationship between the ABC and the Marlowe-Crowne scores.

A second explanation for the weaker relationship between the ABC and the Marlowe-Crowne scores than the relationship between the Marlowe-Crowne and RABC, is the lack of items on the ABC scale which express desirable attitudes about adult-child sex. The RABC, on the other hand, offers both desirable and undesirable attitudes about sex between adults and children. There is an interaction between scores on the sub-scales comprising the Marlowe-Crowne and the correlation coefficients calculated between the ABC, the RABC and these sub-scales.

The correlation of the two sub-scales of the Marlowe-Crowne and items describing pro-adult-child sex attitudes and those describing anti-adult-child sex attitudes differ. The strongest relationships are between the pro-sex items of the RABC and the denial sub-scale scores ($\underline{r} = .21$) and the anti-sex items of the RABC and the acquiescence sub-scale scores ($\underline{r} = .21$). There was almost no relationship between the denial scores and the anti-sex items and the acquiescence scores and the pro-sex items. The correlation between the pro-sex items of ABC scale, which only offers pro-sex items, and the denial sub-scale of the Marlowe-Crowne was $\underline{r} = .16$ and between these same items and the acquiescence sub-scale scores was $\underline{r} = -.01$; this was, similar to the correlation between this type of RABC items and the same sub-scale. Unlike the case with the

RABC, the ABC does not offer items describing anti-adult-child sex attitudes and a correlation coefficient between items expressing these desirable attitudes and the acquiescence sub-scale score cannot be calculated. In summary, the offering of both desirable and undesirable attitudes in the RABC allowed for a positive correlation with both the sub-scales of the Marlowe-Crowne. The offering of only one type of item, those describing undesirable attitudes as the ABC, limited the finding of positive correlation coefficients to one, that is, between the denial sub-scale and pro-sex items. Since the Marlowe-Crowne scores are determined by both the sub-scales, it is predictable that the correlation coefficient between the Marlowe-Crowne and the RABC will be larger than the correlation coefficient between the Marlowe-Crowne and the ABC.

There is a positive relationship between some of the measures of social desirability and the RABC: The correlation between the social desirability ratings of 28 items in study one and the endorsement of these same items in study two was highly significant. Even though this correlation is large and the percent of common variance is large, it should not be understood that subjects responding to the RABC are responding primarily in terms of the social desirability of the items: First, it should be expected that community volunteers would show a large number of socially desirable traits, that is, obtain high scores on the Marlowe-Crowne and that they would reject highly undesirable attitudes

about adult-child sex, that is, show high scores on the RABC; and, Second, since the subjects rated the social desirability and endorsed the same items, it is difficult to separate the effect of social desirability responding from the effect of the common content of the items. While the correlation coefficient between these two measures is high, it is suggested that these subjects did not respond defensively to the RABC.

Defensive responding

The community respondents were not expected to be "defensive". They were not being critically evaluated and their responses were anonymous. The responses of the community volunteers to the two Marlowe-Crowne sub-scales did indicate a positive tendency to attribute positive behaviors to themselves although they did not deny negative behaviors. The community volunteers endorsed almost twice as many acquiescence items than they did deny denial items. Millham (1974) indicated that the individuals most likely to "cheat" were those who were trying to avoid social censure; and who scored high on the denial sub-scale. In this study, the community volunteers scored low on the denial sub-scale.

Study 1 and Study 2

Discussion

Improvement of the ABC

The data suggests that the RABC scale is an improvement on the ABC scale and may be more effective in measuring cognitive distortions. The ABC and the RABC scales measure, for the most part, the same variable; the correlation between the two scales is highly significant (Rho =.75, $p \le 0.001$). In this thesis, the case for assessing the value of the revision rests on the improvement psychometric properties of the RABC.

Reduction of defensive responding

The pattern of responses by the community volunteers to the RABC suggests that the revision of the ABC was effective in reducing defensive responding. The community volunteers rejected the undesirable items but, unlike their responses to the ABC, they did not reject them all with a "strongly disagree". Apparently, it was the addition of a justification for the pro-adult-child sex attitudes expressed by the items which changed their responses.

This finding of a change in response patterns as a result of a change in justification of the behavior or attitude is consistent with studies reporting the willingness of male subjects to indicate the possibility of engaging in rape if they would not be caught. Malamuth, Haber and Feshbach (1980a) found that 25 out of 53 male volunteers in an introductory psychology class at UCLA indicated they would consider participating in a rape similar to a fictional account "If they were assured they would not be caught". The perceived reduction of risk of social sanction allowed the respondents who had these callous attitudes to more freely express them.

This perceived reduction of risk of external censure should also increase the possibility of the child molester endorsing items which seem to be closer to neutral in social desirability although, in reality they do, in fact, express pro-adult-child sex attitudes. The small, but significant, decrease in the strong rejections by the community volunteers of the ABC, factor 1 items, which represent cognitive distortions and which appear in the RABC scale, suggests that offenders may be persuaded by the justifications and actually endorse the items. Subjects also showed even fewer strong rejections of the subtle, negative items of the RABC than the ABC, factor 1 items.

Psychometric improvements

The ABC is susceptible to two types of response bias, acquiescence and social desirability responding. To reduce response bias and improve the psychometric properties, the RABC varied the keying of the items, offered items with less extreme social desirability ratings and mixed the critical items in with other similar but non-critical items. The RABC was effective to the extent the respondents did not categorically reject with extreme responses the items representing attitudes regarding adult-child sex. The frequency distributions of responses to the RABC scale items indicated that the subjects did not "discover" the "right" answer and use it throughout the remainder of the test, as they seemed to do on the ABC scale items. The very same ABC, factor 1 items elicited different; that is, less extreme rejection responses, when embedded with other items on the RABC scale than when they were presented on the ABC scale. Instead of making the same answer "strongly disagree" to the items subjects sometimes responded with "disagree" or even "agree".

The distribution of responses to the ABC score was extremely negatively skewed; over two thirds of the respondents scored above 129.5 out of a possible total of 140. This skewing will make it difficult to establish the concurrent and discriminative validity of the ABC. The results indicate that the RABC scores are not as negatively skewed.

The RABC scale appears to have acceptable test-retest reliability. Denton (1991) re-tested 34 of the community volunteers one week later after study two was completed and the test-retest Pearson Product moment coefficient correlation (Rosenthal and Rosen, 1984) was .80 ($p \le .0001$).

There was no indication of either "Naysaying" or "Yeasaying" on the RABC scale. No subject endorsed the desirable or rejected the undesirable items with the same extreme endorsement rating across all items; no subject scored the maximum on the RABC scale.

Remaining problems of social desirability responding

The ABC appears to be less susceptible to social desirability responding than the RABC; the correlation between the Marlowe-Crowne and the RABC was larger, although not statistically significant, than the correlation between the Marlowe-Crowne and the ABC. This appearance of a stronger relationship stems from the peculiar distribution of the ABC responses: The range of responses to the ABC is extremely small due to the transparency of its items, the homogeneity of the items, and the extremely undesirable attitudes expressed by the items. The limited range of the ABC responses and the extremely skewed distribution violate assumptions on which parametric statistics are based (Siegel and Castellan, 1988). It is assumed that the correlation

coefficient between the Marlowe-Crowne and the ABC would be larger and, perhaps, significant if the distribution of the ABC responses was closer to normal.

There are some indications that the RABC is less susceptible to social desirability responding than the ABC. Subjects choose "strongly disagree", in response to the same items on the RABC, fewer times than they did when the same items were offered on the ABC scale.

Implications for Future Research

There are some shortcomings of the RABC which should be corrected before the scale is used with an offenders. The frequency distributions of the responses to items on the RABC scale revealed that two items were confusing or ambiguous; these items should be eliminated or revised.

The question of whether the RABC scale is effective in differentiating individuals who have been involved in adult-child sexual contact from those who have not remains to be answered. One must administer the scale to a variety of control and offender groups to determine the validity of the test.

Expected offender responses to the ABC and RABC

Sexual offenders are concerned about making the "right" response to questionnaires which may reveal their character, unless extraordinary conditions to ensure confidentiality have been instituted. Barbaree (1989) indicates that denial and minimization are prominent defensive mechanisms used by most sexual offenders because they "protect" sexual offenders from the negative reactions to their behavior by both others and themselves. By convincing others that the behavior of sexual assault against a non-consenting victim did not occur or that the severity of the assault was less than alleged, the offender hopes to avoid punishment. It is hypothesized that cognitive distortions are the defense mechanisms used by sex offenders to avoid admitting that their behavior was assaultive or even sexual in nature. By viewing their deviant acts as acceptable or, at least justifiable, the offender avoids "... the anxiety, guilt, and loss of self-esteem that would usually result from an individual committing behaviors contrary to the norms of society" (Abel et al 1989). For offenders who are being investigated by authorities, the consequences of endorsing or rejecting an item on the ABC depend on whether one considers self-censorship or the reactions of society: If the offender agrees that an 8 year old can consent and enjoy sexual contact with adults, he is not subject to self-censure because the item confirms his belief that he has not caused any harm; yet, he knows that he runs the risk of social sanction. On the other hand, if the offender disagrees with

the cognitive distortion, he avoids the possibility of social sanction but, may experience self-censure when he has admit to himself that he has committed such behavior. If the offender adopts this latter strategy, his responses to the ABC scale will generally look very similar to the community group.

The threat of social sanctions may be reduced for offenders when they respond to the RABC scale. The socially appropriate or correct response to the RABC items is not as obvious as on the ABC scale because the attitudes or behaviors are justified. When a child molester responds to an item that expresses an attitude in favour of adult-child sex but about which social desirability is unclear, the child molester may believe the risk of social sanctions to be small. The child molester, who believes that the risk of social sanction is small if he endorses the item, may endorse the item in order to avoid the self-censure which would follow rejecting an item which his own (defenses) attitude. Still, it is expected that respondents who are not burdened with such cognitive distortions and who have not committed sexual assaults will reject the attitudes.

Expected offender responses to the Marlowe-Crowne

Offenders are expected to score higher than the community volunteers on the Marlowe-Crowne social desirability questionnaire (Stermac et al.,

1990). And, those individuals who score higher on the Marlowe-Crowne are expected to endorse <u>more</u> items on the RABC scale that reflect cognitive distortions. It is expected that the higher their Marlowe-Crowne scores, the more offenders will want to imagine their previous sexual behavior with children as socially acceptable.

It is hypothesized that, unlike the positive correlation between the Marlowe-Crowne and the RABC scores obtained by the community volunteers, the child molesters who score high on the Marlowe-Crowne will score low on the RABC.

It is also predicted that the sub-scale scores of the Marlowe-Crowne will be different for child molesters than with community volunteers.

Offenders are not expected to be as concerned about attributing positive attributes to themselves as denying negative attributes; their acquiescence scores should be lower than those of community volunteers. On the other hand, offender scores on the denial sub-scale should be significantly larger than the scores of the community volunteers (Millham, 1974). Unlike non-offenders whose acquiescence scores are significantly larger than their denial scores, offender scores on the acquiescence sub-scale and the denial sub-scale should be similar.

The Marlowe-Crowne provides norms for university students only (Bollard, Crino and Rubenfeld, 1988); Given the defensiveness of sexual

offenders, offender norms for social desirability responding, as measured by the Marlowe-Crowne scale, should be collected. It would also be of interest to relate offenders' scores of internal and external locus of control and to the acquiescence and denial sub-scales of the Marlowe-Crowne scale.

Summary

The results of this study indicate that the RABC scale is a good first step in the development of a instrument to evaluate cognitive distortions in sexual offenders who are not assured of anonymity. The RABC scale has improved the psychometric properties of the ABC scale, reduced response bias, and increased the likelihood of defensive respondents revealing their cognitive distortions. The community volunteers rated the justified RABC items as undesirable but not as extremely undesirable as the items comprising the ABC scale. Significantly, the community volunteers did not reject the ABC, factor 1 items as strongly when they were embedded in the RABC scale than when the same items were offered in the ABC scale. Significantly, the community volunteers were less likely to strongly reject the subtle items which represented cognitive distortions than they were the more transparent, ABC, factor 1 items. There were no significant correlations between the Marlowe-Crowne scale, a measure of social desirability, and the RABC.

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Appendix A

<u>Advertisement</u>

Male and female adults required to participate in psychology study at S.M.U. Subjects will be paid to complete a brief questionnaire. For more information call: 492-2489 or 420-5855.

Appendix B

Briefing for all subjects

STEP #1: POTENTIAL SUBJECTS (CALLERS)

- 1. Tell the subject that you are conducting a psychological study.
- 2. Tell the subject that their participation would involve their coming to either S.M.U. or our location on Spring Garden Road to complete a questionnaire. The questionnaire takes between 10 and 20 minutes. Tell them how much they will be reimbursed.
- 3. Ask for the subject's age. Participation will be confined to persons who are 21 or over.
- 5. Assure potential subjects that should they wish to participate as subjects, their anonymity will be guaranteed. Only group data, not individual data, will be discussed in the experimental report.
- 6. Explained that those who decide to participate will complete the questionnaire individually (with no other subjects in the room).
- 7. Inform them that some individuals may find the questionnaire, which asks about attitudes in regard to attitudes towards women, hostility towards women, and aduit/child sexual contact, to be upsetting. If the potential subject is concerned that they may react in this way, they are not advised to participate. If they do not think it will be upsetting to them, then they are informed that should they decide to participate, they may withdraw from the study at any point in time (and still receive payment).
- 8. If they decide to participate, arrange a time and place.
- 9. More information on the study will be given after completion of the questionnaire.

STEP #2: SUBJECT PARTICIPATION - UPON ARRIVAL

- 1. Repeat above briefing.
- 2. Give subjects the consent form to read. This form contains all of the information they will need. If they have questions, answer them. If not, they may sign the form.

Appendix C

Consent to Participate in Psychological Research

This study involves an examination of items concerning attitudes and beliefs about women, hostility to women, and child/adult sexual contact. The participants will be asked their opinions and reactions to questions related to these issues. For example you may be asked to rate the social desirability of the following statement:

"An adult fondling a young child or having the child fondle the adult will harm the child."

or indicate your beliefs about the following statements:

"It doesn't really bother me when women tease me about my faults."

"Under modern economic conditions with women being outside the home, men should share in household tasks such as washing dishes and doing the laundry."

If I am unhappy or concerned about any aspect of my involvement in the study, I may withdraw at any time for any reason. Or, I may refer my concerns to Dr. Robert J. Konopasky at 420-5855 or 492-2489. Also, Mr. Steve Cann will be available to listen to my concerns and may be contacted at 420-5855 or 492-2489. In addition to being able to disclose my concerns to Dr. R.J. Konopasky and Mr. S. Cann, I have been given the phone number for the Services for Sexual Assault Victims (425-0122).

I will receive	this reimburse	ment following	00. I have been in my participation in	the study,
even if I withd	raw from the s	itudy without cor	mpleting the questi	onnaire.
the psycholo	gical study. the research	I have read procedures and	, agree to pa and understood I I have had all m	the above
Witness:				
Date:				

Appendix D

Debriefing of all subjects

About the research...

Research into the psychology of sexual assault and child sexual abuse is still in its infancy. Most research has focused on the victim, and investigation of child molesters has not been common. This study is being conducted as part of research underway at Saint Mary's University to develop a questionnaire for identifying attitudes associated with the sexual abuse of children. Such a questionnaire, when fully developed, could be useful in at least three ways:

- 1.) identifying those who have attitudes which facilitate sexual contact with children:
- 2.) helping a therapist determine goals for treatment, for example, changing attitudes about sex between adults and children which are distorted:
- 3.) assessing the effectiveness of treatment of men who have sexually abused children in the past in regards to changes in their attitudes and beliefs about sex between adults and children.

Research has shown that individuals who sexually abuse children think about this behavior in unusual ways; this kind of thinking "allows" them to go on abusing children. These beliefs, for example, "Children can benefit from sexual contact with an adult", are unacceptable.

Thank you for participating in our study. If you have any questions please call Dr. R.J. Konopasky or Steve Cann at 492-2489 or 420-5855. If you were upset by any items on the questionnaire, don't hesitate to call the individuals mentioned above or the Services for Sexual Assault Victims at 425-0122.

Appendix E

Social Desirability Ratings of the Revised ABC

This questionnaire examines the social desirability of various statements concerning adult/child sexual contact. Please indicate how social desirable or social acceptable each statement is. Do not indicate how you feel about each statement but indicate how you think society in general would view these statements. You may feel that all illegal activity are unacceptable but society may consider some types of illegal activity are as being more acceptable than others. For example, if you asked 100 people to indicate which of these two statements was more socially desirable, most would indicate that the second was more socially acceptable.

- 1) Armed Robbery of a supermarket is OK, as they are all insured.
- 2) Stealing a pork chop from a supermarket to fed my family is OK.

Both statements may be are illegal but societies reaction to the second indicates that society may think the behavior may have been justified, or understandable, or mitigated by the circumstances.

Socially desirable	neutral	Socially undesirable
12	456	79
9-point scale. 		
Please rank the social desirability	•	

12333	neutral	79 Socially undesirable
If a child does not react or appears adult's sexual advances, she (he) proto have sex with the adult.	to enjoy an	123456789
2) Many adults who have had sex wit parent, or other adults, when they w children, report the sexual contact as positive experience.	ere	123456789
3) Children who are at least 13 year of they are doing when they flirt with an		123456789
4) A 13 year old (or younger child) do when she (he) is acting in a sexually manner.		123456789
5) An adult cannot really tell what ef with a child 13 years (or younger) will	fect having sex I have.	123456789
6) The reason there are laws against contact with children, is to protect they are old enough to make their ordecisions.	hem until	123456789
7) As long as an adult has the child at heart, the child will not be harmed restricts the intimacies to touching.		123456789
8) If a child has sex with an adult, the back at the experience as an adult a as a positive experience.		123456789
9) A young child (step- child or close have sex with with an adult only if sh loved the adult and wanted the sexu	e (he) truly	12345678{
10) An adult fondling a young child or child fondle the adult will harm the c	having the hild.	12345678{
11) A 13 year old child who is sexua his/her peers will not be affected by adult.	lly active with sex with an	12345678

14344 Socially desirable	56 neutral	789 Socially undesirable
12) Having sex with a child is not an accept way to show my love and affection.		123456789
13) Adult sexual contact with 13 year old children is biologically natural; it has been accepted for centuries, in some cultures.		123456789
14) Children don't tell others about having a parent (or other adult) because they are ashamed or have been threatened by the adult or parent.		123456789
15) In many cultures sex between adults a children age 11 to 13 is acceptable; it sho be allowed in our culture, if the child consents.		123456789
16) There is no way for a parent (or other know in advance the consequences of having sex with a child 13 year old (or younger): it may be beneficial, harmful or have no effect on the child.	adult) to	123456789
17) Children 13 years old (or younger) wi had sex with their peers know what they a doing and can consent to sex with an adu	ıre	123456789
18) I can do no harm to a child when havir her (him) despite the absence of physical force to get her (him) to have sex with me		123456789
19) An adult who just feels a child's all ov touching her (his) genitals is not really be sexual with the child.		123456789
20) It is no more serious to have sex with than having an affair, if you are not happy with your marriage or if your spouse has died.	your child	123456789
21) Sex between a 13 year old (or younge and an adult can be a very positive experience.	er child)	123456789

Socially desirable	466 neutral	Socially undesirable
22) Horse play where there is fon a child's genitals is OK.		123456789
23) An adult fondling a young chik young child fondle the adult can c child harm.		123456789
24) Touching a child's genitals du will have no effect on the child.	iring horse play	123456789
25) If a child seems to enjoy sex w probably very little harm will be do child.		123456789
26) When a young child asks an a means he/she is curiou. about wh experience with an adult would be	nat a sexual	123456789
27) When a young child asks an a best for the child to have her/his fi experience with a caring adult, rat learn from a clumsy peer.	irst sexual	123456785
28) An adult fondling a young chil child fondle the adult will not caus any harm.	d or having the se the child	123456789
29) Young children occasionally w little or no clothes on, and this is p natural.		123456785
30) Sex between a 13 year old (or an adult causes the child no emot problems.	younger child) and ional	12345678

133	46	
Socially desirable	neutral	Socially undesirable
31) Young children have no "hang-twalking around naked, but this does mean they want to experience sexual ouching/fondling with an adult.	not	12345678(
32) A young child can appear to act s provocative but not realize she (he) i so.		12345678
33) A young child can appear to act or provocatively but not want to have se contact with an adult.		12345678{
34) A man's relationship with his dau other child is not changed a whole lo fact that they have had sexual exper together.	ot by the	12345678(
35) If a child has sex with an adult, the back at the experience as an adult ar as a negative experience.		12345678
36) A child can be harmed by having touching with an adult and neither thor the adult will be aware of it.		12345678
37) Sex between a 13 year old and a can be a very positive experience.	n adult	12345678
38) An adult can tell by the reaction touching the child's genitals will harn child.	of the child if n the	12345678
39) It is a child's right to decide if they engage in sexual contact with an add society's desire to punish adults, where spect the child's desire to have sereffect punishing the child.	ult, and Io	12345678
40) If a child 13 years old asks to sectouch an adults genitals, there is not wrong with complying.		12345678
41) When children watch an adult monthing to educate the child about s		12345678

1233 Socially desirable	46666	789 Socially undesirable
42) If my son or daughter sees me na good opportunity to teach them abo	iked this is a	123456789
43) If a child 13 years old (or younge on the street asks for shelter, she (h probably appreciate and enjoy sexu attention.	ie) would	123456789
44) Thirteen year old (or younger) p working the streets because they lik		12345678
45) An adult cannot know how much him (her) and a child will hurt the chil		12345678
46) If I ask a child 13 years old (or yo wants to engage in some sexual act she (he) agrees, it will not harm him much.	ivity and	12345678
47) Having sex with a 13 year old "s shows the child that she/he is value others.		12345678
48) Sex education should be taugh family.	nt at home by the	12345678
49) With the advances in modern blaws against sexual contact with you daughter's (son's) should be re-evatoned down.	ır	1- -2 345678
50) Touching a child's genitals by mot be called sexual assault, even if bothers the child.		12345678
51) Sexual contact with an adult du childhood did not harm me, and sim sexual contact will not harm other c	ilar	12345678
52) The sexual contact with an adult in childhood taught me valuable thing sex, and my sexual contact with child the same.	s about	12345678

123	.4	.6	79
Socially desirable	neutral		Socially undesirable
53) The sexual contact I had with an ac childhood was beneficial or at least o cause me any harm.			123456789
54) Society's outrage about the harm abuse of children is a progressive st doesn't give proper consideration to instances when sexual contact has reffects or is beneficial.	ep, but it those		123456789
55) If both the child and the adult appe sexual contact, there would be no bi problems with continuing that activity	ig		123456789
56) Because many children benefit fro contact with adults, society should b colerant of such activities.			123456789
57) An adult having sex with an older s less likely to be harmful than sex w younger child (less than 9) and shou colerated more.	ith a	1	23456789
58) Some types of careful sexual co adults and children could have very l negative effect on children.			123456789
59) Some children are probably more benefit from sex with an adult than o children; and, if an adult can identify children who would benefit, then the sexual activity should not be conder	ther those oir		123456789
60) The confusion that a child may exresult of sexual contact with an adult something that most children would out of anyway.	is		123456789
61) A child can be harmed by having adult, even if there was no physical tinvolved.			123456789
62) Having to be secretive about sexu with children is more damaging than actual physical contact.			123456789

1234 Socially desirable	neutral	789 Socially undesirable
63) If you have been harmed by sex with an as a child, that does not mean that your having sex with children will harm the child		123456789
64) A child who often touches an adult in a manner may have been sexually abused		123456789
65) Children are sexually more mature too are better educated about sexual matters if a child 11-13 wants to have sexual relati with an adult, that is OK.	s, so	123456789
66) Just because a child does not show a immediate reaction to sexual contact with adult, does not mean that there will be not long term effect on the child.	n an	123456789
67) The benefits of your children (or other having sex with you far outweigh the possible harm	children)	123456789
68) If an Adult asks an 11- 13 year old child (he) wants to have sex and the child agree than It will not harm the child.		123456789
69) Sex between a 13 year old (or young an adult causes the child emotional problems	er child) and	123456789
70) If an Adult asks an 10 year old or your if she (he) wants to have sex and the chi agrees, than It will not harm the child.	nger child Id	123456789
71) If an Adult touches an 11-13 year old sexual manner and he (she) does not obtain it is OK to continue.	child in a pject,	123456789
72) The sexual education of children sho involve viewing the adult's sex organs or having sex with the adult.		123456789

	4:6-:6-:6-:	Socially undesirable
73) If an Adult touches an 10 year of child in a sexual manner and he (sh not object, than it is OK to continue	ne) does	123456789
74) "Rough housing" with children is opportunity to make any form of se contact.		123456789
75) Given the birth control methods opposition against sexual contact leathers and daughters is unnecess interferes with a natural display of a	between ary and	123456789
76) Sexual contact with a daughter (o daughter) should not be punished severely as sexual contact with oth children.	as	123456789
77) When fondling a child, the adult how his (her) behavior will affect the		123456789
78) Our society is now realizing that and adult and a child is wrong.	sex between	123456789
79) Many sexual hang ups of adults having been sexually abused as ch		123456789
80) A child 13 years old (or younge to sex with an adult.	r) cannot consent	123456789
B1) If a adult fondles or has sex with drinking, he should not be held to l responsible as an adult who is sob	be as	1234567
82) During play with a child if a man b sexually aroused, he should stop immediately.	pecomes	123456789
83) Having sex with a 13 year old (c is alright, as the child will forget it ar		123456789
B4) If an adult inadvertently become aroused while touching a child all c is nothing wrong with continuing to the child.	over, there	123456789

133		9
Socially desirable	neutral	Socially undesirable
85) If a child does not say no, the ch have sex with the adult.		123456789
86) My relationship with my daughte child is harmed by the fact that we together.		123456789
87) A child will have sex with an adu child does not want to.	ılt even if the	123456789
88) The only way I could do harm to having sex with her (him) would be physical force to get her (him) to hawith me.	to use	123456789
89) When children watch an adult n the child learn about sex.	nasturbate, it helps	123456789
90) Having sex with someone you years old is the same as having an		123456789
91) Even if a child cries they will not the fondling or sexual contact.	be harmed by	123456789
92) A 13 year old (or younger) can dwith an adult.	consent to sex	123456789
93) A child (13 years or younger) will about being sexually assaulted adult.		123456789
94) Children should do what they a includes having sex with an adult.	re told, and that	123456789
95) A child who stares at an adult v sexual advances is a child who is confused.	when he makes frightened and	123456789

DATA SHEET

Code Number:	
Age:	
<u>Last Grade Completed</u> (Circle corresct response)	1) Less than grade 9 2) Less than grade 12 3) High School
completed	4).Vocational or trades training 5).University studies
completion.	without 6).University graduation 7).University Graduate Studies
Gender: male or female (circle correct response)	

Appendix F

The Abel and Becker Cognitive distortion scale

A.B.C. SCALE

Read each of the statements below carefully, and then circle the number that indicates your agreement with it.

- 1. Strongly agree
- 2. Agree
- 3. Neutral (neither agree nor disagree)
- 4. Disagree
- 5. Strongly disagree
- If a young child stares at my genital it means the child likes what she (he) sees and is enjoying watching my genitals.
 A man (or woman) is justified in having sex with his (her) children or stepchildren, if his wife (husband) doesn't like sex.
 2 3 4 5
- 3. A child 13 or younger can make her (his) own decision as to whether she (he)

 wants to have sex with an adult or not.

 1 2 3 4 5
- 4. A child who doesn't physically resist an adult's sexual advances, really wantsto have sex with the adult.1 2 3 4 5

5	If a 13 year old (or younger) child flirts with an adult, it means he (she) wants to have sex with the adult.	1 2	3 4	‡ 5
6.	Sex between a 13 year old (or younger child) and an adult causes the child no emotional problems.	1 2	3 4	‡ 5
7.	Having sex with a child is a good way for an adult to teach the child about sex.	1 2	3 4	4 5
8.	If I tell my young child (step-child or close relative) what to do sexually and they do it, that means they will always do it because they really want to.	1 2	3 4	4 5
9.	When a young child has sex with an adult, it helps the child learn how to relate to adults in the future.	1 2	3 4	4 5
10.	Most children 13 (or younger) would enjoy having sex with an adult, and it wouldn't harm the child in the future.	1 2	3 4	4 5
11.	Children don't tell others about having sex with a parent (or other adult) because they really like it and want to continue.	1 2	3 4	4 5
12.	Sometime in the future, our society will realize that sex between a child and an adult is all right.	1 2	3	4 5

13.	An adult can tell if having sex with a young child will emotionally damage the					
	child in the future.	1	2	3	4	5
14.	An adult just feeling a child's body all over without touching her (his) genitals					
1~4.	is not really being sexual with the child.	1	2	3	1	5
	to the really being behavior with the office.	•	-	Č	7	•
15.	I show my love and affection to a child by having sex					
	with her (him).	1	2	3	4	5
16.	It's better to have sex with your child (or someone else's child) than to have an					
	affair.	1	2	3	4	5
17.	An adult fondling a young child or having the child fondle the adult will not cause					
17.	the child any harm.	1	2	3	4	5
		·	_	Ī	•	
18.	A child will never have sex with an adult unless the child really wants to.	1	2	3	4	5
19.	My daughter (son) or other young child knows that I will still love her (him)					
	even if she (ne) refuses to be sexual with me.	1	2	3	4	5
20.	When a young child asks an adult about sex, it means that she (he) wants to see		_	_		_
	the adult's sex organs or have sex with the adult.	1	2	3	4	5

21.	If an adult has sex with a young child it prevents the child from having sexual	
	hang-ups in the future.	1 2 3 4 5
22.	When a young child walks in front of me with no or only a few clothes on, she	
	(he) is trying to arouse me.	1 2 3 4 5
23.	My relationship with my daughter (son) or other child is strengthened by the	
	fact that we have sex together.	1 2 3 4 5
24.	If a child has sex with an adult, the child will look back at the experience as an	
	adult and see it as a positive experience.	12345
25.	The only way I could do harm to a child when having sex with her (him) would	
	be to use physical force to get her (him) to have sex with me.	12345
26 .	When children watch an adult masturbate, it helps the child learn about sex.	12345
27.	An adult can know just how much sex between him (her) and a child will hurt	
	the child.	1 2 3 4 5
28.	If a person is attracted to sex with children, he (she) should solve that problem	
	themselves and not talk to professionals.	1 2 3 4 5

Appeddix G

A.T.W.S.

The statements listed below describe attitudes toward the role of women in society that different people share. There are no right or wrong answers, only opinions. Please express your feeling about each statement by indicating whether you:

- (a) agree strongly
- (b) agree mildly
- (c) disagree mildly
- (d) disagree strongly

Please indicate your opinion by putting either A, B, C, or D on the line at the end of each statement.

- Swearing and obscenity are more repulsive in the speech of a woman than of a man.
- Women should take increasing responsibility for leadership in solving the intellectual and social problems of the day.
- Both husband and wife should be allowed the same ground for divorce.

4.	Telling dirty jokes should be mostly a masculine choice.	
5.	Drunkenness among women is worse than drunkenness among men.	
6.	Under modern economic conditions with women being outside	
	the home, men should share in household tasks such as washing	
	dishes and doing the laundry.	
7.	It is insulting to women to have the 'obey' clause remain in	
	the marriage service.	
8.	There should be a strict merit system in job appointment	
	and promotion without regard to sex.	
9.	A woman should be as free as a man to propose marriage.	
10.	Women should worry less about their rights and more about	
	becoming good wives and mothers.	
11.	Women earning as much as their dates should pay equally	
	when they go out together.	
12.	Women should assume their rightful place in business and	
	all the professions along with men.	

13.	A woman should not expect to go to exactly the same places	
	or to have quite the same freedom of action as a man.	··- ··
14.	Sons in a family should be given more encouragement to go	
	to college than daughters.	• .
15.	It is ridiculous for a woman to run a locomotive and a man	
	to darn socks.	••••
17.	Women should be encouraged not to become sexually intimate	
	with anyone before marriage, even their fiances.	
18.	The husband should not be favored by law over the wife in the	
	disposal of family property or income.	• • • • • • •
19.	Women should be concerned with their duties of childbearing	
	and house tending, rather than with desires for professional and	
	business careers.	• • • •
20.	The intellectual leadership of a community should be largely	
	in the hands of men.	
21.	Economic and social freedom is worth far more to women than	
	accepting the ideal of femininity which has been set up by men.	

22 .	On the average, women should be regarded as less capable	
	of contributing to economic production than are men.	
23.	There are many jobs in which men should be given preference	
	over women in being hired or promoted.	Biog. 4 per 1989 -
24.	Women should be given equal opportunity with men for	
	apprenticeship in various trades.	
25.	The modern girl is entitled to the same freedom from regulation	
	and control that is given to the modern boy.	

Appendix H

H.T.W.S.

Instructions:

This questionnaire is designed to assess your feelings toward women. Thus all of the statements on this page refer to women. Please read each statement carefully and circle "T" or (True) if the statement describes your feelings, and "F" or (False) if the statement does not describe your feelings or if you disagree with it.

1.	I feel that many times women flirt with men just to tease them or hurt them.	TF
2.	I feel upset even by slight criticism by a woman.	TF
3.	it doesn't really bother me when women tease me about my faults.	TF
4.	l used to think that most women told the truth, but now l know otherwise.	TF
5.	I do not believe that women will walk all over you if you aren't willing to fight.	TF

TF

Lately, I have been kind of grouchy with women.

15.

16.	I think that most women would not lie to get ahead.	TF
17.	It is safer not to trust a woman.	TF
18.	When it really comes down to it, a lot of women are deceitful.	TF
19.	I am not easily angered by a woman.	TF
20.	I often feel that women probably think I have not lived the right kind of life.	ΤF
21.	I never have hostile feelings that make me feel ashamed of myself later.	TF
22 .	Many times a woman appears to care, but just wants to use you.	ΤF
23.	I am sure I get a raw deal from the women in my life.	TF
24.	I don't usually wonder what hidden reason a woman may have for doing something nice for me.	TF
25.	If women had not had it in for me, I would have been more successful in my personal relations with them.	ΤF

26.	I never have the feeling that women laugh about me.	TF
2 7.	Very few women talk about me behind my back.	TF
28.	When I look back at what's happened to me, I don't feel at all resentful toward the women in my life.	ΤF
29.	I never sulk when a woman makes me angry.	ΤF
30.	I have been rejected by too many women in my life.	TF

Appendix I

The Revised A. B. C. Scale

Read each of the statements below carefully, and then circle the number that indicates your agreement with it.

- Strongly agree
 Agree
 Neutral (neither agree nor disagree)
 Disagree
 Strongly Disagree

1.	On the average, women should be regarded as less capable of contributing to economic production than are men.	12345
2.	The reason there are laws against sexual contact with children is to protect them until they are old enough to make their own decisions.	12345
3.	I am not easily angered by a woman.	12345
4.	Having sex with a 13 year old (or younger child) is alright, as the child will forget it anyway.	12345
5.	Both husband and wife should be allowed the same grounds for divorce.	12345
6.	Under modern economic conditions with women being outside the home, men should share in household tasks such as washing dishes and doing the laundry.	12345
7.	When fondling a child, the adult should always know that, no matter water, his (her) behavior will harm the child.	12345
8.	Young children occasionally walk around with little or no clothes on, and this is perfectly natural.	12345
9.	Lately I have been kind of grouchy with women.	12345
10.	The husband should not be favored by law over the wife in disposal of family property or income.	12345
11.	Young children have no "hang-ups" about walking around naked, but this does not mean that they want to experience sexual touching/fondling with an adult.	12345
12.	The confusion that a child may experience as a result of sexual contact with an adult is something that most children could grow out of.	12345

4. Disagree 5. Strongly Disagree I am sure I get a raw deal from the women in my life. 1--2--3--4--5 13. An adult fondling a young child or having the child fondle 1--2--3--4--5 14. the adult will not cause the child any harm. Women should take increasing responsibility for leadership 1--2--3--4--5 15. in solving the intellectual and social problems of the day. 16. Children who are 9 years old know what they are doing 1--2--3--4--5 when they flirt with an adult. 17. Many times a woman appears to care, but just wants to use you. 1--2--3--4--5 It is insulting to women to have the 'obey' clause remain in 18. 1--2--3--4--5 the marriage service. Voluntary sex between an 11 year old (or younger child) and an 19. adult causes the child no serious emotional problems. 1--2--3--4--5 I don't seem to get what's coming to me in my relationships 20. 1--2--3--4--5 with women. A 13 year old child who is sexually active with his or her peers 21. 1--2--3--4--5 will not be affected by sex with an adult. 22. Telling jokes should be mostly a masculine choice. 1--2--3--4--5 23. A young child can act in what seems to be a sexually provocative manner but not realize she (he) is doing so. 1--2--3--4--5 24. Economic and social freedom is worth far more to women 1--2--3--4--5 than accepting the ideal of femininity which has been set up by men. 25. I generally don't get really angry when a woman makes fun 1--2--3--4--5 of me. 26. There is no way for a parent (or other adult) to know in 1--2--3--4--5 advance the consequences of having sex with a child 13 years old (or younger): it may be beneficial, harmful or have no effect on the child. 27. If a child has sex with an adult, the child can look back at 1--2--3--4--5 the experience as an adult and see it as a positive experience.

1. Strongly agree

3. Neutral (neither agree nor disagree)

2. Agree

- Strongly agree
 Agree
 Neutral (neither agree nor disagree)
 Disagree
 Strongly Disagree

28.	I used to think that most women told the truth, but now I know otherwise.	12345
29.	An adult who just feels a child "all over" without a lot of touching of her (his) genitals is not really being sexual with the child.	12345
30.	Women should worry less about their rights and more about becoming good wives and mothers.	12345
31.	An adult can tell by the reaction of the child if touching the child's genitals will harm the child.	12345
32.	Sons in a family should be given more encouragement to go college than daughters.	12345
33.	I do not believe that women will walk all over you if you aren't willing to fight.	12345
34.	My relationship with my daughter (son) or other child could be strengthened by the fact that we have sex together.	12345
35.	The sexual education of children should not involve the viewing of adults' sex organs or even having sex with the adult.	12345
36.	The intellectual leadership of a community should be largely in the hands of men.	12345
37.	A child 13 years old cannot consent to sex with an adult.	12345
38.	Adult sexual contact with 13 year old (or younger) children is biologically natural; it has been accepted, in some cultures, for centuries	12345
39.	Drunkenness among women is worse than drunkenness among men.	12345
40.	It is a child's right to decide if they wish to engage in sexual contact with an adult, and punishing the adults who have sex with the children who want to, is wrong.	12345
41.	A woman should be as free as a man to propose marriage.	12345
42.	Having sex with a child is not an acceptable way to show my love and affection.	12345
43.	I feel upset even by slight criticism by a woman.	12345

- 1. Strongly agree
- 2. Agree
- 3. Neutral (neither agree nor disagree)
- 4. Disagree
- 5. Strongly Disagree
- 44. With the advances in modern birth control, the laws 1--2--3--4--5 against sexual contact with your daughters (sons) should be re-evaluated or toned down. 45. It is ridiculous for a woman to run a locomotive and a man 1--2--3--4--5 to darn socks. Women earning as much as their dates should pay equally 1--2--3--4--5 46. when they go out together. A child will have sex with an adult even if the child does not 1--2--3--4--5 47. want to. I do not often find myself disagreeing with women. 1--2--3--4--5 48. If a child 13 years old asks to see or touch an adult's genitals. 1--2--3--4--5 49. there is nothing wrong with the adult complying. I never sulk when a woman makes me angry. 1--2--3--4--5 50. Sexual contact between an adult and a child may be beneficial, 1--2--3--4--5 51. for the child, or may at least not cause any harm. There should be a strict merit system in job appointment 52. 1--2--3--4--5 and promotion without regard to sex. 53. Having to be secretive about sexual contact with children 1--2--3--4--5 is more damaging to the children than the actual physical contact. Swearing and obscenity are more repulsive in the speech 54. 1--2--3--4--5 of a woman than of a man. 55. The only way I could really do harm to a child when having sex 1--2--3--4--5 with her (him) would be to use physical force to get her (him) to have sex with me. "Rough-housing" with children which includes a little sexual 56. 1--2--3--4--5 touching, almost by accident, is not sexual assault. Women should assume their rightful place in business and 57. 1--2--3--4--5 all professions along with men. A man must stop immediately if playing with a child in any 58. 1--2--3--4--5 way makes the man sexually aroused.

	 Strongly agree Agree Neutral (neither agree nor disagree) Disagree Strongly Disagree 	
59.	I rarely become suspicious with women who are more friendly than I expected.	12345
60.	When children watch an adult masturbate, it helps the child learn about sex.	12345
61.	If a child has sex with an adult, the child can look back at the experience, when the child becomes an adult, and see it as a neutral experience.	12345
62.	I do very few things to women that make me feel remorseful afterward.	12345
63.	Many sexual "hang-ups" of adults are the result of having been sexually abused as children.	12345
64.	Women should take increasing responsibility for leadership in solving the intellectual and social problems of the day.	12345
65.	Just because a child does not show an immediate reaction to sexual contact with an adult does not mean that the child enjoyed the sexual contact.	12345
66 .	Very few women talk about me behind my back.	12345
67 .	There are a number of females who seem to dislike me very much.	12345
68.	An adult having sex with an older child (10-13) is less likely to be harmful than sex with a younger child (less than 9) and should be tolerated more.	12345
69 .	It is safer not to trust a woman.	12345
70.	A child who watches an adult (and doesn't walk away) when the adult is making sexual advances is frightened and confused.	12345
71 .	A child 9-12 years old cannot consent to sex with an adult.	12345